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MEDICAL DOLLARS AND SENSE

BY C.E. BLANCHARD M.D.

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MEDICAL DOLLARS AND SENSE

Medical Dollars and Sense

THE STORY OF THE BUILDING
OF A LARGE OFFICE PRACTICE

By

CHARLES ELTON BLANCHARD, M. D.

Medical Department, Ohio Wesleyan University, (Now combined with the Medical Department Western Reserve University,) Class 1902. Author:
"The Business Side of Medical Practice."
"The Letters of Dr. Betterman."
"The Nut Cracker and Other Human Ape Fables."

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"Failure exists only in the grave. Man, being alive, hath not yet failed; always he may turn about and ascend by the same path he descended by; and there may be one that is less abrupt (albeit longer of achievement), and more adaptable to his condition."

—*The Magic Story.*

"Fortune is ever elusive, and can only be retained by force. Deal with her tenderly and she will forsake you for a stronger man.

"Man should not be blinded to whatsoever merit exists in the opportunity which he hath in hand, remembering that a thousand promises for the future should weigh as naught against the possession of a single piece of silver." —*The Magic Story.*

DEDICATED

¶ To the earnest doctor, no matter where Chance has cast his lot, who wants and deserves to make an honest living and an old age competence from the practice of his profession.

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Introduction

THIS BOOK is written and published from two motives. Which to place first, it is difficult to decide. Since the selfish motive will be counted the real one by a self-respecting selfish world, we had better list it first, and so avoid the charge of insincerity at the start.

Let us say, therefore, this book is prepared for sale in order to gather in as many dollars as possible in exchange for as many copies as sold. Books published "to fill a long felt want" are usually produced hoping to fill a long felt want in the authors' or publishers' purse. This book may or may not be needed. It may or may not be a good story. What concerns me is to make as many doctors—yes, struggling doctors—as possible think they need it, and willing to part with a dollar or two to get it. The writer honestly believes it will give value received, yet the reader may have freedom to judge as to this for himself, having paid his money for the privilege.

The other motive listed is a really firm belief in my ability to help a large number of fellow-craftsmen, brothers in the great Guild that ministers to the sick and injured of the race. One of our "live wires" of Chicago has said, "Doctors as business men have not passed the Stone Age." I have no wish to dispute his word, but I know one who has, and that one is

the writer. I have no doubt there are others. If this book succeeds in carrying its message, there will be many others who will pass the Stone Age.

In every town of size we have groups of good men, who, by dominating the profession, by great professional activity, by diplomatic interest in public and institutional affairs, and by numerous other well laid plans, gain desirable and in some cases large incomes. These men I do not expect to help. Indeed, some of the elect ones may enjoy no little amusement at my expense. It is to laugh! Or, perchance, to scorn. Of these I ask nothing; to them I offer nothing.

There is, however, the "average doctor," the earnest, honest fellow out of college from two to ten years, whose income has failed to meet expenses; who by every possible effort has tried to do good work, and to gain and keep a clientele; whose ability and character are worthy of respect, yet who, in spite of all those qualities and conditions which should win the smile of Dame Fortune and gain approval, sees less hope of money success each year. Some of the good fellows go on from year to year, throughout a long career, never having a day of financial independence, and with the one consoling thought that medicine is a service, not a business, and that its success is not expressed in dollars and cents.

This is, let it be admitted, a great consolation, yet life is hard for the man who tries to live "in the world and not of it," and who lacks the wherewithal

to meet the world's demands. Failing to meet its demands he cannot have the conditions and the means with which to be true to himself and his work. So it matters not how we delude ourselves into thinking otherwise, it is money success that expresses the man.

On one of those dark days, when the world looks its worst, when debts grow more troublesome, when self-respect is at a low ebb, when he laments the day he became a doctor and calls himself a "dub," a "mutt"—and no doubt he is for the present—at such a time I hope to come to him with this little book called "Medical Dollars and Sense" and tell him my story. If he does not then see the light, if he has not the moral and physical courage to do what is best and right for himself and his family, and right for the public, we cannot criticise him if he turns his licenses and diplomas to the wall and hunts a job as a hackdriver or in any other honest employment.

By following the principles laid down in this book, the writer, starting in a new town, greatly handicapped—how greatly the story will tell—has in three years' time built up a $10,000 a year practice, all office work. Some of my readers will do better than I have done; others will not do as well. I doubt, however, if there will be one discouraged brother who will not do better than he ever did before.

If a goodly number of these books are sold, and if those who buy admit I have told a good story, made out a good case, and served a useful purpose in my

effort to help the "under dog," then I am repaid. Since all things are reciprocal in this world, I am bound to collect my pay, if it is no more than the fun of telling the story. If I call down upon myself the wrath of medico-political stand-pats, I shall take my medicine along with other "insurgents," for I may have helped a little to make medicine a real democracy instead of a plutocracy.

Every radical is liable to the charge of being unfair, an exaggerator, a disturber, a mal-content, and some are called by even stronger terms, such as prevaricator. In this effort I have tried to be fair, and I am well content with my own solution of a problem. I wish to disturb things—that is true—but for the improvement of the rank and file of doctors and for the health welfare of the people. If these efforts cause the ultra-professional setting hens to cackle and complain, all right. An airing will do them good.

I am not muck-raking; I am telling a story; so let's begin. Your humble servant,

CHARLES ELTON BLANCHARD, M. D.
Youngstown, Ohio.

P. S.—I might add, to appease the disappointment of those who may have expected a finished literary product in this book, that it has been written in the midst of my work, between patients, so to speak, often but a line at a time being accomplished. That it might have a more orderly arrangement and a more polished diction, none will dispute. It carries my message, however, and that, after all, is its purpose.

Raise the standard of your work if you are expecting to raise your income.

CHAPTER I.

ECONOMIC CONDITIONS AND THE DOCTOR.

SINCE the close of the Civil War, no nation on earth has witnessed so great an industrial development as that of the United States. The writer was born August 29th, 1868, and has therefore spent the whole of his life in this period of great business expansion.

More than one million patents have been granted by the United States government. We lead the world in the manufacture of labor-saving machinery and applied science in production. Great wealth has been produced, and prosperity, so called, has been almost continuous. Save for a few short periods of depression, there has been work for all who wanted it. Men have worked and wealth has been created until we stand at the head of all nations as the richest per capita, and the crown of money success and dollar honor has come to the United States of America.

Men rose from the ranks of labor and with natural or acquired faculties for management, that is, ability to exploit workers, became employers. Poor men became rich men. Genius was turned into gold, and out toward the setting sun spread new states, dotted with new villages, live towns and great cities.

The population of the country has grown from 31

million in 1860 to nearly 100 million in 1910. Wealth has increased until in dollars and cents we have outstripped all the older nations. The world looks upon us with wonder, and envy too, perhaps. Ours is called "The Land of the Free." Poor farmers' sons have become presidents; newsboys have grown into bankers, lawyers, and statesmen. Doctors and preachers have developed like mushrooms overnight. Ah, it has been and is yet a glorious country!

Until the year of my birth the doctor was a spontaneous product. The choreboy read medicine in his preceptor's office, cleaned the stable and spittoons, went to the city presently and took a six weeks' "course of lectures"—very ambitious ones took two "courses"—then went home or somewhere and hung out his shingle. We have needed many doctors, and we have them—more doctors per thousand inhabitants than any other country.

During this period of great national development, the city has called the youth of the village and country crossroads. The youth has answered the call. He liked the thought of living on Easy Street, and intellectual labor appealed to him more forcibly than toil with muscle and brawn.

Brain and Brawn are inseparable partners in the affairs of life, but Brain sees to it that he gets the best end of the bargain. Brawn has pulled and carried the load; Brain has been the driver, holding the lines and the whip. Brain has capitalized opportunity, and Brawn has turned the wheels that produce. Brain has devised and directed; Brawn

has sweated and produced. Wealth has been created for Brain, and Brawn has been well fed, usually.

Intelligence combined with Capital always has had and always will have the larger measure of compensation. Brawn must content itself on less than 17 parts of the production, while Brain demands 83 parts, because, Brain says, Capital bears all the burden, takes the risk, and assumes, by the very nature of things, all the responsibility.

The Grand Old Party, the party of Lincoln and Grant, the Savior of the Union, the Liberator of the Slave, the— everything that is good and perfect in a political party,—threw its protecting arms around the infant American industries and blessed them with high tariff. When Brawn to turn the wheels was lacking, it opened the ports to all manner of foreign labor, that there might be plenty of hands ready to do the dirty work. It said to native sons: "This is to your interest. If you do not get into more favored pursuits it is your own fault. Any American born man who does not rise from the ranks of Toil, does not deserve any better lot than that of the foreigner. Common labor must be done. Who will do it? Either show us, or stop complaining about open ports for free labor."

Tariff has been and is still the bone about which the political dogs at Washington fight and snarl; and during these fifty years the G. O. P. has been but little disturbed in the control of things. Even when out of power, Brain was just as potent in its sway

of the opposition, until Brawn often wonders why such a foolish thing as a vote was ever given to him.

The G. O. P. has controlled the vote of labor by the threat of the empty dinner pail; the pension has been the bait for the old soldier. The Negro vote came its way as naturally as the lick of a dog is ready for the hand that feeds it. Fear that Brawn might grow intelligent has made Capital the most timid thing on earth.

By the use of labor-saving machinery, by grasping vast fields of natural resource for raw material, by importing vast hordes of common labor, by hindering the organization and the spread of political intelligence among workers, by dominating legislation, by influencing the courts to usurp unwarranted powers,—by all these and many other methods, Brain, combined with the G. O. P. usually, yet just as ready to use the Democratic party when necessary, has until now enjoyed a wonderful prosperity, a prosperity that has made us the top-notch nation in wealth. But the wealth is all in the hands of Brain; Brawn should be contented if he gets a full belly.

The consumer, with his small portion in wages of the wealth produced, has little with which to buy, and over-production is constantly causing starvation. Though science has long been ready to point the way to efficient systems of exchange, distribution, communication, and transportation, Brain has held its staying hand to prevent any progress that did not add to profit on capital. The cry has been and is for markets. We look to China, South America, every-

where, to buy what we need at home, but which we cannot buy, because we have no means to pay for it.

Using any and all pretexts, it has saddled the worker and the small taxpayer with a burden of millions and millions of interest-bearing bonds, in order that Capital might enjoy the income. It has controlled the financial system so completely that banks and bankers rule the nation. Federal and state officials are more or less helpless puppets that dance when Brain pulls the string. Shirking the Burden has been reduced to an exact science. Functions of government, national, state, and municipal, have been taken over, and it is the constant study of Brain, to see what more can be absorbed to add certainty to investment.

Panics come because banking is regulated not on scientific principles, but for private instead of public gain. Abundant crops are allowed to waste, because transportation is controlled and markets regulated for private profits instead of public weal.

I am not writing a political essay. I am telling a story. It is needful, however, to show the condition of things, and the doctors' relation to these conditions. I want you to get the picture of 150,000 or more legally listed physicians, trying to make a living under this state of affairs,—a prosperity to the mass, that drips down through the several strata of society, from Brain to Brawn; a prosperity that is artificial and unreal, because man-produced, and controlled against all the forces of natural, social evolution.

When a new machine for labor saving increased

the workman's product ten-fold, it did not increase his wages or shorten his hours. The machine and one man did the work of ten, leaving nine to hunt new jobs or join the Army of the Unemployed—the class of enforced leisure. This wonderful age of a million patents has created two idle classes—the Idle Rich and the Idle Poor.

Brain has organized and centralized, combined and consolidated. Corporations, those artificial, soulless, legally-created individuals that can sue and be sued, have been capitalized, not on a basis of real investment, but on dividend-earning power. If a $500,000 investment, using labor under competitive wages and labor-saving machinery will earn 10% on a million, then issue a million in stock—water it! If further improvement of process, usually the result of hired skill, if savings in by-products or economy of any kind increases the dividend power, water it again and again.

If labor learns to see the evil in selling its only product, work, by competitive methods, and organizes to exclude competition, then Brain says to Brawn: "We will not deal with you as a body. We hire and fire individuals as best suits our interests. Organize if you wish—this is a free country; but we reserve the right to run this factory as we see fit—it is our property. If you do not care to work you shall not interfere with those who do."

The arrogance of Brain is great, and Brawn is often made desperate by it. What is sauce for the goose is sauce for the gander. If Brain is entitled by

law and precedent to organize and control competition, then Brawn is entitled to the same liberty. The great struggle begins. Both parties are selfish children in the game of life—savages in the process of making.

The labor union has about the same human nature as the councils of capital. The spy system, the hired thug, the armed comrade in the name of Law shoots to kill his own fellows, hypnotized by the idea that he stands for Law and Order. But lawless corporations have ridden rampant over all public rights and some Captains of Industry have said: "The public be damned."

Brain has organized and centralized. Seven men and their associates control the wealth of the nation. The necessities of life come through their hands at any price they care or dare to demand. Competition is dead or dying. The sooner dead the better. Perhaps evolution will compel men to see the ultimate folly of individualism, and guide them to a more natural and a better way of life.

Now let the doctor slide into this happy turmoil. How nicely he fits in to serve the purpose of Brain. How easily he forgets the Sacred Code, and plays his part of the game. How kindly he serves Brain to conserve property, for property is everything. Man has no rights that come before property. Unfortunately there is still a jury system—poor as it is—and juries are troublesome. The Liability Company was invented to relieve Brain of this annoyance.

It costs ten million dollars a year to fee these companies to fight the injured workmen in the courts.

The moment a man is hurt, he is discharged. Wise judges have invented a dozen "doctrines" such as the Doctrine of Assumed Risk, etc., all to make it easy for the jury, and to make it very difficult for a workman to receive an injury in any manner that will afford him any relief. The emergency hospital, the hospital ward, the shop doctor, the railway surgeon, all these good things are on the surface humanitarian, but in reality the whole system is one of self-defense. The shop doctor, the railway surgeon, and all other medical servants of the corporations are designed to secure friendly testimony and to protect capital from the worthy and the unworthy, from the real and the fake injury, for capital has been preyed upon by many surprisingly subtle schemes.

Thus we see before us the battle between Manhood and Money, between Brain and Brawn. We see medicine, a noble profession, drawn into this horrible and relentless struggle in spite of itself. Avowing in all its traditions that medicine is not a business, but a profession, humanitarian in all its purposes, self-sacrificing, self-denying, clean and pure, yet individuals are ready to sell themselves to manufacturing concerns, to railway companies, to street car lines, to liability companies, to lodges and fraternal societies, to insurance companies, until now Brain steps into the market and buys the doctor from the lowest bidder the same as pig iron or any other commodity.

Thus capital has subsidized the medical profession, or such part of it as it can use to its own advantage, leaving the balance to fight out its own competitive struggle. It is to this combat I wish to call your attention in my next chapter.

It's awfully hard for an honest man to look an outlawed debt in the face.

CHAPTER II.

THE STATUS OF MEDICINE ITSELF.

SOON after the Civil War, medicine as a science took on a new life. The hospital and field work of that bloody struggle developed some great pioneer American surgeons. To list the many names is needless. The wounds of this war were scarcely healed before the great progress in surgical technique, asepsis and antisepsis, came on. In the various cities of size these leaders gathered about them a band of earnest workers, and great medical schools were founded. The few old colleges became real medical schools, and many new ones sprang up. Surgeons grew like—Mr. Finney's turnip, which never did any harm. I wish this might be said of all surgeons.

The larger cities soon had from one to a dozen medical schools, and many smaller towns had one, even towns where practically no clinical material was available. The medical profession had the medical college fever. Hundreds of these schools had no moral or financial basis, and no excuse for existence, except that a group of doctors felt called upon to teach the youth of that community; an ambition prompted by an over-plus of professional enthusiasm or personal selfish motives, perhaps both.

Diplomas were written to sell, and they sold

well. The American doctor was coming into his own. As with lawyers, so with doctors, the woods were full of them, good, bad, and indifferent. From 4,000 to 5,000 stepped forth each year, full-fledged and ready to do and die for humanity's sake. There were already in the field many old timers, who had never seen the inside of a medical college or any other college, but who had "practiced medicine" a certain number of years that extended back into the dim past.

When this chaotic condition of things compelled the earnest scientific portion of the profession and the intelligent public to demand some regulation of medical practice, then state after state passed medical practice laws. Nearly all provided for the non-graduate class by granting a license to all who had been in practice ten years.

After much mending and patching, nearly all states have now fairly good medical practice laws. Fake colleges have ceased to be profitable. The examination before the state board is the thing. A diploma is useless unless it comes from an institution of recognized standing. Reciprocity between states of equal requirements for license, activity on the part of medical authorities to protect the profession and the public from illegal practitioners,—all this has at last almost confined competition within the ranks of the profession itself. Leaving out all the various drugless cults, it must be admitted that this competition is wonderfully keen. A struggle to make a living presents itself before the average doctor, a

struggle so hideously real and tangible that it saps his courage and blunts his morals and often kills his natural kindness.

My Ohio license, granted in 1902, is No. 9859, which indicates the number that had gone before. My Colorado license was No. 5655, granted in 1908 after an examination. What a story it would be if we knew the history of all these devotees of Galen and the other "Fathers."

The people may not understand all the ins and outs of the history of medicine, but the general idea prevails that the younger men are the more competent. It has become very difficult for men (with a few exceptions) out 20, 25 and 30 years to make a living, because of this keen competition.

When the new medical practice laws came into force, there soon developed a number of healing cults, which evaded the law by using no medicine or drugs. Those with a religious motive, such as Christian Science, New Thought, and the like, having all the fanatical fervor of the devotees of any emotional religion, have been regulated, punished, prosecuted, and perhaps persecuted. Attempts to protect the public from these people have seemed to injure real medicine more than to serve for the public good. These religious healing cults go on saying their prayers for cure, giving their "absent treatments," and collecting their fees.

The great law of life, that Nature cures 85% of the sick, with or without medical help, aids the "healers" just as it does the regular physician.

Long ago men of real science gave up trying to be understood, letting things drift about as they would, yet doing for each case the best that could be done under the circumstances.

Of all the drugless cults, Osteopathy, through the aid of such practical politicians as ex-senator Foraker and others, was the only one that received the recognition of a license. The osteopath, the neurolpathist, the electro-therapeutist, the water-cure doctor, the mechano-therapist, and others you can list, are getting fees from the public for the care of the sick.

The regular medical profession is helpless against all this competition, especially hostile competition. That within its own ranks is keen enough, but when all this is added, we throw up our hands. Our protests are the objections of jealousy. The earnest well-trained doctor dare not open his mouth when report sails around his neighborhood that Mrs. Namby Pamby, his former patient, "has just had seven of the bones in her back put into place by the new doctor. No wonder she was sick. Dr. Realman never examined her back. All he did was to give her medicine, dope, dope—that's all he did. Now Dr. Newcomer uses no medicine. He just cures with his hands. He is a Chi-ro-prac-tic doctor. How do you say it?"

Such is the prattle that comes back to us.

Turning to the newspapers we find Dr. Newcomer's advertising. He does not hesitate to adver-

tise. No dreadful Code stares him in the face. He is after business and he gets it. Here is what he has to say:

DR. NEWCOMER, D. C.

CHIROPRACTOR

501-2 Bank Bldg.

Graduate of the "Palmer School of Chiropractic," Davenport, Iowa, where the largest free open clinic in the world is conducted and where over 1000 people have their spines —back bones—adjusted daily for all manner of diseases.

Have You Tried Almost Everything and Failed to Get Results?

Don't feel discouraged until you have investigated

"Chiropractic"—Kiro-prac-tic

WRITE, CALL OR PHONE BELL 1624

Office Hours: 10 to 12 2 to 4 6:30 to 7:30

This soul-soothing call is further embellished with a photograph of Dr. Newcomer, holding a vertebral column in his hands, and pointing a finger of wisdom toward it as if to say, "Here is the cause of all human woe—subluxation. Put these bones into place and,—presto! health."

What a wonderful discovery it is. How sad that the human race has suffered so long needlessly. These imitators of the great Dr. Still, father of Osteopathy, have a neat graft formula and are now working it for all it is worth, using syndicated advertising prepared by skillful sophistry spinners, and raking in the shekels that the guillible public stand ready to hand out to any plausible faker.

Something New Under the Sun

After nearly thirty years of searching investigation, study, experiment and at great expense, covering more than a dozen systems of medicine and healing, we have formulated a system of preventative, prophylactic and health-building methods of removing the cause of disease and also to aid nature to establish a state of vigorous bodily health.

Our specialties are—Electric Light Baths, Massage, Curative Movements, Manipulation, Vital Magnetism, Mental Suggestion, Sarcognomy, Hygiene and Scientific Dieting. These are applied to the human body in a way that is best suited to the individual needs of our consultants, in order to stimulate physiological action by mechanical and other means for the purpose of establishing health.

The application of our methods will stimulate the circulation; promote the elimination of all poisons from the body; establish harmony in all the bodily functions, and cause the life of the patient to conform to natural laws, for **this only** will effect a permanent cure of any and all human ailments.

We do not practice medicine, nor do we treat, nor undertake to cure disease of any kind, for the very good reason that neither doctors nor medicine never did, never can, nor never will cure any disease.

The healing principle or power to heal is within the patient. We denominate this the human soul. Some call it mind, sub-consciousness, etc. The human soul—the intelligence that builds up the body from the moment of conception; places every bone, muscle, brain, nerve, blood-vessels in their proper places, and all through life continues to build, repair and carry off the waste products from the body, knows more about the anatomy and physiology of the human body than all the doctors in the world.

What we claim to do is to impart instruction in the science of life, health, hygiene, diet and also to apply natural methods of building up your health, and the **natural** result will be, that you will lose **all** your diseases as if by magic, regardless of name or kind of ailments.

If you are well and wish to attain to the highest degree of physical health and the fullest enjoyment of life and its pleasures, it will be to your interest to investigate our claims.

If you are sick and wish to be restored to exuberant health by the quickest, safest, best and only rational means, investigate.

If you are discouraged, because nature has failed to respond to all other methods of cure; no matter what your ailment, you will be very materially benefited in less than one hour. Further information cheerfully furnished free. Write or call at the

SANATORIUM

THOMAS DOEM, M. D. T.

Health Specialist.

Open from 9 a. m. to 9 p. m. Sundays by appointment only.

I often wonder which vertebra is subluxed to cause gonorrhea or tuberculosis? I wonder if this man is really self-deluded or an outright charlatan. Anyway here is a new class of fee-getters, and what are we going to do about it?

The fact that all these "unofficial" fee-getters make a living indicates a widespread lack of confidence in drug treatment on the part of the general public. This lack of confidence is fostered by the proverbial disagreement among doctors themselves, and the radical antagonisms of the three older schools. I refer to the Regular, Homeopathic, and the Eclectic.

All this chaos of conflicting theories and modes of treatment has naturally undermined the confidence that the public is supposed to have in doctors. A large portion of the profession has fallen into the practice of using bamboozle, mental as well as physical placebo, depending upon high sounding talk to get the fees. "Suggestive Therapeutics" came along just in time to save the situation.

We have plenty of jackals ready to take advantage of the situation. Some of these are doctors, and some are not. On the opposite page I have reproduced the advertisement of one.

This wonderful spontaneous combustion needs no analyzing comment. Yet these men get business. They make a living, and are at all times active competitors with doctors.

Thus competition has become so keen that the average income of doctors has fallen to less than

$1,000 a year; some claim $750 as the right figure. Some saintly, well established physicians refuse to admit that the profession is having a hard time. They say, here and there the incompetents may suffer, but the competent men are doing well enough. Those who complain about the condition of things are setting up a man of straw.

On the other hand, well-informed laymen claim that doctors "work their cases," make twice too many calls, perform needless operations in order to get the fees, and do no end of treatment that avails nothing except to run up a bill. We are told that doctors keep the patient sick, prolong the case, and use all sorts of dishonest ways to eke out a living. They often tell that funny story about Dr. So-and-So who when asked how his practice was, said, "Bad; my practice died yesterday." In fact we are told so many things by such wise men as Elbert Hubbard and Upton Sinclair, Dr. Tilden and others, that our greatest surprise is that people have any confidence in us at all.

We are told that surgeons and would-be surgeons have extracted untold numbers of ovaries, appendices, etc., in order to collect the fees. In every neighborhood is that brave man or woman who stood out and would not let the doctor do what he thought was best, and these brave meddlers never tire of recounting the story. We are told many other things that prove how thoroughly shaken is the public confidence, and how natural it is for the

average citizen to look upon the doctor as a necessary evil, along with the saloon and the prostitute.

The doctor joke ranks with that of the hobo, and the popular magazines are embellished with doctor stories in humorous vein, to cast still further reflection upon the sincerity and the ability of the physician. Doctors have been muck-raked by article after article, and plenty of books have come out like "Medical Chaos and Crime," filled with isolated instances of wrong and ignorant doing that the reader is expected to generalize, to prove how doctors have departed from the high ideals of medicine.

In every community we have one or more well established physicians who practice by the old rule. They attend anybody and everybody. They never present bills. People pay them when they please and about what they please. The aggregate income is ample, and the very business slackness adds to their popularity. These Doctor Goodfellows do not seem to realize that this plan of practice is both unfair and unjust, as well as unethical, to their fellow craftsmen. People must press them repeatedly to get a bill, and then when presented it is so much smaller than they expected it would be, that it is the talk of the neighborhood. A poor widow is told that her bill is nothing. This wonderful bit of surprising gossip goes far and wide, and Dr. Goodfellow is nearly sainted!

He has created a most effective system of controlling competition? Where is the man, old or young, who can disturb his practice? He is com-

petent, good, kind, sincere, a noble doctor—the ideal! But to make one such saint in the profession we cause a hundred medical derelicts.

While we are discussing all these conditions and forces that make it difficult for the average doctor to make a living, we must not neglect to mention the specialists. Specialism was a happy invention. It seems to harmonize with the spirit of the age. Medicine has been wonderfully specialized, so wonderfully, indeed, that as old Doctor Scott, of Cleveland, once said, the general practician has nothing left but a small ring about the umbilicus.

But for the desire to limit competition, we should have very few real specialists. The eye would naturally claim its list. Surgery is, by the very nature of its work, a specialty. However, when we must recognize the proctologist, the gynecologist, the orificial surgeon, and the whole list of surgical specialists and medical specialists, it is too much. Design sticks out, and we see the motive of dollars.

At some society meeting the good "specialist" brother takes us aside, gives us a good cigar, and proposes a commission arrangement, offering us half the fees to "assist" him; then we begin to see light. We awake at last in our year of grace, to discover that as general family doctors we are just trade drummers for specialists and surgeons, and we feel proud of our jobs.

In my previous chapter I tried to outline the great economic struggle now going on. The people are awakening to the fact that so far in the history

of our country money has ruled and manhood has been exploited. There is now beginning a fight to restore real democracy, and to secure the return of a better measure of compensation to the man who produces. It is proper to ask, How has the doctor acquitted himself in this matter so far? What is his financial standing? The answer is easy. He has the proud distinction of having the poorest credit of any professional class. The few who by fortunate circumstances and strong personalities have gained some financial independence, are looked upon as the E. Z. Marks par excellence. Every Get-Rich-Quick Wallingford has found the doctor ready picking. Only recently have our journals sought to protect us, and the work of the **Medical World** and the **Medical Council,** both of Philadelphia, deserve great praise.

In closing this brief discussion of the present medical status, I am forced to ask indulgence if I have not drawn the picture fairly and truthfully. I have not intended to over-draw. I am aware that many will feel as if I had. I am sorry that facts seem to make it so discouraging an outlook. It calls to mind what one old professor said to us, the class of 1902. "Boys," said he, "you are about to enter a noble profession, but—pardon me—it is a damn poor business."

Money isn't everything, but nearly everything worth while represents money.

CHAPTER III.

THE ORGANIZED PROFESSION AND ETHICS.

I BELIEVE in trade unions. I believe in medical societies.

Doctors are social animals, like other folks. They need fellowship and the stimulus for growth that each gets from contact with brighter men. Organization, along right lines, should promote their business welfare.

I believe in the Code of Ethics. I also believe in the code of the Golden Rule. I believe medicine should be a helpful humanitarian fellowship. As a student I studied the Code of Ethics of the American Medical Association. I was enthused with the noble sentiment found therein. I could not and still do not understand how that part, "Obligations of Patients to their Physicians" reaches the public, but it reads well, and some doctors may assume the duty of teaching its precepts to laymen.

I soon began to moult my illusions about ethics. I saw the shifting industrial population of larger towns and cities. I soon found out that few respected the family doctor tradition. The doctor is called when grave danger threatens and forces the necessity upon them. Usually, the nearest at hand is summoned. If two or more are called, the first man on the job gets the case. The speedy auto has

won many doctors their fees, because it lands the goods sooner than the horse or street car.

I also moulted the idea that I should do great scientific stunts. I was counted skilful in laboratory diagnosis. I had fitted myself with all the latest instruments of precision, and had most of the important tests down to a fine finish, and I fully expected to be a very scientific doctor. Indeed, my experience reminds one of what Dr. Oliver Wendell Holmes said in "The Poet at the Breakfast Table" about young doctors. Let me quote it:

"You asked me about young doctors, and about our young doctors, they come home *tres bien chausses*, as a Frenchman would say, mighty well shod with professional knowledge. But when they begin walking around among poor patients—they don't commonly start with millionaires—they find that their new shoes of scientific acquirements have got to be broken in just like a pair of boots or brogans. I don't know that I have put it strong enough. Let me try again. You've seen those fellows at the circus, that get up on horseback, so big that you wonder how they can cling in the saddle. But pretty soon they throw off their outside coat, and the next minute another one, and then the one under that, and so they keep peeling off one garment after another till people begin to look queer and think they are going too far for strict propriety. Well, that is the way a fellow with a real practical turn serves a good many of his scientific wrappers—flings them off for other people to pick up, and goes at the work of cur-

ing stomach-aches and all the other little mean unscientific complaints that make up the larger part of every doctor's business."

Well, I shed my surplus scientific baggage and got down to common things. I tried to know what to do for this and that pain or symptom, to give my patient a cure or relief. I soon learned that people want results. I have sought causes and treated as little for symptoms as possible.

It did not take me long to find out the value of personality in medical practice. I saw men of ability and dominating personality gather about them their following. Each society is divided into several cliques, more or less hostile to each other. Often these active groups center about or are made up largely of hospital staffs. A few leaders dominate the situation. Usually the leading surgeon, for his skilful using of the knife seems to command a peculiar reverence from his fellows, or his nerve is so greatly admired, or the well-known size of his income, or something, lends this leader, or the few leaders, the power to assume the position of great medical luminaries, and the rest of us are just neat little satellites.

While the hospitals are open to all physicians in good standing, and "good standing," may mean almost anything these leaders care to dictate, still the service is so rendered and the rules are so interpreted that the outsider is readily discouraged from trying to use the institution for his cases. The Elect Ones, and their associates, hustle for cases to

keep the beds full. Anybody at all sick, hears, "Well, the best thing you can do is to go right to the hospital." Off the sick ones are rushed to the favored institution. This active forcing of hospital patronage, has created in the public mind a great repugnance toward the hospital as an institution; but it sounds mighty well to hear how crowded the wards and rooms were for the past year, and how much we need fifty additional beds, as read from the good superintendent's annual report.

It is not my purpose to discuss the evils of staff management, nor to expose the grafts that exist, little and big, for I am not muck-raking. I mention this only to show one feature of the fight to limit competition, ignore ethics, and reward the strong. I will not go into the use of such institutions as sources of publicity and free advertising. I will not discuss how effort is made to teach the public to think only staff doctors are worth mentioning as reputable physicians. There are a hundred side lights that might be thrown on this phase of my subject, but that is another story.

Medicine is surely a fine example of the struggle for existence and the survival of the fittest. Perhaps this is as it should be. I am not filing a complaint. I am not talking of "sour grapes." I am trying to show how poorly it all harmonizes with the great code we all learned to love so well in our senior student days.

I had not been out long before I learned that doctors are their own worst critics. I soon found that

the rule is to condemn each other's treatment, to steal each other's cases, and assume every hostile attitude in secret, for selfish ends. It may be said that I have been unfortunate in meeting the exceptional men. I thought so myself for a number of years, but after an experience that caused me to call personally upon every doctor in every town of size from Pittsburg to Denver, and from North to South, and sounding all this great body of the profession, I found my experience tallied fairly well with that of the majority. How does it tally with yours, brother? How many fingers do you need to count off your loyal medical friends?

When I studied the history of the dominant national organization I learned a story of one scandalous fight after another. I heard of the favoritism of this council and that committee, and I observed the arrogance of certain officials. I saw the same political wire-pulling, the same games as used in national politics. It was all this, and much more that I do not need to recount, that compelled me to conclude that the organized profession has all the ear marks of the modern political organization—some say it is as full of graft and cold-blooded selfishness as any party machine.

I was satisfied that medicine is no more a democracy than the national government; that it has been impregnated with the same spirit of plutocracy—tarred with the same stick, a power-seeking, dollar-grasping system. It sounds nice and looks well to belong to the local society, and the national society, at-

tend the meetings, listen to learned papers and discussions. It "listens good" to be in "good standing," to wear the ethical cloak—but in the main it is a cloak of hypocrisy. It is a secret badge that saves you from a subtle boycott from your fellow craftsmen; and if you do not wear it, this want justifies your competitor in using any of a hundred secret and contemptible agencies to work your undoing and hinder your success. When you do wear this wonderful badge, it makes you feel somewhat silly to sit beside Brother A. who to your knowledge knifes you in the back every time he gets a chance in spite of your "good standing;" by the side of Brother B. who is a well known and eminently successful abortionist "under counsel;" by the side of Brother C. who bargains to cure and treats by the month; by Doctor D. who gets his practice through his wife's social activity; by another and another, each of whom to your positive conviction is anything but fair and honest in his relation with both the public and the profession.

As I studied all this, it forced me to the conclusion that the organized profession means well, that the Code is ideal and right, but that ethics had failed—utterly failed, just as religion has failed—to make good men out of doctors obliged to make a living under the present economic conditions. I saw Ethics very punctilious and critical. I saw Ethics criticise a doctor for having a sign too large. I saw men called to account for any sort of open advertising efforts, yet I knew doctors whose business schemes were

really dishonest, who used every sort of device to attract public attention, yet whose "good standing" was not injured, simply because these men dominated their own circles.

To say that this process of disillusionment of Doctor Hopeful was a great, wet blanket thrown over his enthusiasm, is putting it very mildly. It was almost a knockout. Hating hypocrisy of every sort, it was certain I could not compete in the game of getting business. I am a poor mixer. I could not attend church, join lodges, clubs, and social affairs because it was good business to do so. I wanted people to employ me because they had confidence in me as a competent doctor, not because I was a good fellow, a friend, a relative, a lodge brother, or churchman. I have always valued friends, and the few who have penetrated my natural reserve, have long been loyal and profitable to me. I have never tried, however, to cash a church membership or a lodge password. I have never sung in the church choir or worn a plug hat to advertise my business.

Some of my friends have said, "You are too sincere; you expect too much. Take things as they are. Get in the game. Do as others do. Ideals, forget 'em. It is success, money success, that counts. Money talks. If you don't get it some other fellow will."

I well remember those dark days when I had to admit that Ethics meant nothing, a mere formality, like the prayers said at Congress. My great and noble ideal was shattered—the medical profession

a part of the great scramble of the world—do others before they do you—dog eat dog—every fellow for himself and the devil take the hindermost.

But of all that when I get to it. I meant to settle down and do the best I could, join the society, and keep my hands ethically clean, fight for the right and for professional ideals. I knew and realized that prominent doctors could do things I could not. I realized how they all wanted work and pulled every wire to get it, "ethically." One brother told me he would seek the office of coroner, not for the small salary it paid, but for the publicity it gave him. Another doctor friend took the job of wholesale vaccination for his district of the city. The pay was small, but it would be a good advertisement. Oh, how badly we poor devils needed a start!

So it came home to me as a firm belief in the value of medical societies and in the high character of the ethical ideal, but I found out that most successful doctors attained success by some hook or crook not quite in line with the spirit of the Code. One marries the daughter of a hospital trustee, and is soon elected a member of the surgical staff. Another selects a well-to-do wife of high social position, and through this connection he soon wins an elite practice. Nine out of every ten successful doctors are men of good or great professional ability, yet many of equal ability barely make a living. Nine out of ten successful men,—I mean money success, of course—have attained their positions by some means not in keeping with true medical ethics, yet not openly

ignoring the letter. That is, "Ethics" is a word to conjure with, to talk about, to use for dress parade purposes, but for real business it is the modern "get there" spirit that counts.

These are some of the things young Doctor Hopeful learned soon after graduation. He was not so young either, being 34 years of age, and he had seen something of the world as a teacher, writer, traveler, and various other shifts to make a living.

I am not telling a fictitious tale. This is a personal history, and these preliminary chapters seemed necessary to lead up to my real narrative and to exhibit my convictions and opinions, with my reasons for the same. I do not claim infallibility. I do claim sincerity. If my conclusions are wrong, then my erring is at least honest. I am stating things as I see them. If you do not get my viewpoint, then I shall not prove helpful to you. Some of the brothers may say, "All this may be true, but it doesn't sound that way when we tell it." Perhaps not. I am telling you how I have won a good practice and I claim to be more ethical in the real sense of the word than many of the leaders and followers of the Doctors' Elect Club.

The thing we call success is a definite art that one must cultivate with the exercise of his gray matter.

CHAPTER IV.

DOCTOR HOPEFUL HANGS HIS SHINGLE.

ON THE 2nd day of May, 1902, our class was launched upon its professional voyage. The good dean had predicted great things of this class, 35 strong,—strong in numbers if in no other way. "The class of 1902 will be heard from," said the dean. Each wondered if he would be one of the favored to send the message. A few of us knew how this prediction was made of every class. It had become a habit with our good dean to encourage us. We knew, however, it was up to us personally. We knew some would fail, some succeed, and a few gain envied positions. Ten years have fully demonstrated that the class of 1902 was about like all others.

At this time in Ohio the wise lawmakers had passed the so-called new medical law, but as our class had matriculated before the law went into effect, we received our licenses in exchange for a five dollar note, without examination. We were therefore soon ready for business.

It then appeared to me impossible to begin a medical practice without some capital. The doctor must at least have the appearance of success. He must live well, dress well, have a good and well-equipped office; and besides he must have money for current expenses while waiting for a professional in-

come. My best course, it seemed to me, was to continue drawing a salary. During the remainder of 1902, and through 1903 and 1904 I traveled for drug houses as a special "detail man." My business was to make perfunctory calls on doctors. This work took me to all the larger towns of the middle West. In large cities like St. Louis, I often stayed several months.

During the hours when I could not work for my firm, I visited clinics, hospitals, and private offices, where I made friends with good men. They taught me much, and I repaid them by assisting when I could, yet many of them gave me freely what help they could in the kindest and most unselfish spirit. I cultivated the friendship of the men I needed, and gave special attention to surgery, genito-urinary work, eye, ear, nose, and throat. These three years I counted of great value to me as a wonderful post-graduate course. Besides interviewing for my employers the thousands of doctors, as I did in all this vast field, I did not fail to learn something from each,—the practical everyday business points not to be acquired at college. I learned many things to do, and some things not to do.

It was a royal experience. As I think of all these good souls who helped me—often without knowing it—of their kindness and sympathetic interest, my heart warms up for the American doctor. Though I have passed out of their memory along with scores of other travelers who so frequently tread their waiting room rugs, they have not from mine. Today

I look back upon this period of my life and say, "Heaven bless them all." No detail man is refused a cordial hearing in my office. I know their trials, and I shall try to repay those who used me so well, by a like use of those who come to me.

By 1905 I had saved a little money and turned my thoughts once more to Cleveland. It had been my home for ten years, and I loved it as a city. I wanted to make it my home—my city home at least; I had built a country place over in Grand River Valley where I expected to spend my old age, if I ever had one to spend. My father, grandfather, and great-grandfather had lived there, so I felt as if it might be the old age rest-haven, from which I would go to join those who sleep on the hillside.

I finally opened an office in the down town section of Cleveland, hoping to do a general office practice, such as I now do. I thought ten years of acquaintance in the place should be worth something to me, and as soon as people who knew me found out my location and how ready I was to serve them, they would come, one sending another. I was on the twelfth floor of a modern office building, among many other doctors, great and small, some of whom were members of our college faculty. I had telephones and a fair office equipment. My nicely engraved cards were ready to hand out to every one I knew or wanted to know, and I was thoroughly ready for business.

While on the road I had formed the popular habit of smoking—my only "bad" habit—but the fear of

offending sensitive nostrils sent me outside to do my smoking. But sensitive nostrils were so scarce in my office, that I might as well have filled it full of smoke; for I had little to do but smoke—and wait—and murmur not! The doctors I knew in the building spoke pleasantly when we met in the halls or on the elevators, but not one paid me a call or gave me one lift of encouragement. Some of these men were very busy, but I never had a call for help or assistance, or to take any of the overflow. However, I did not expect them to help me, and I was not disappointed. We had been advised not to settle in a college town. Those of us who had temerity enough to do so, had to sink or swim, just as we could. I did get some business, but not enough to pay expenses. I was determined to stick it out, and should have done so but for a knock that Opportunity gave at my door.

When Opportunity knocks you should listen, and I did. I bought the Cleveland Emergency Hospital. The price was $4,000. I had $7.50 cash balance with which to buy it. It is only fair to explain that I had used up for my new office outfit and in the building of my country house nearly all my savings from my traveling work, and had gone into debt besides. The $7.50 was all the ready money I had to stand between me and that place called "broke."

But I bought the hospital. A friend loaned me $150, and I paid $100 down, and signed a contract to pay $200 a month until the balance was paid. It was an incorporated company organized by some few manufacturers and a banker or two, to conduct a

hospital for injured workmen. Doctors and nurses were hired by the month. The shops opened their doors to agents who canvassed the men for memberships, and paymasters took the $2.00, $3.00 or $5.00 as the case might be for a year's dues, from a designated pay. When I took hold of the affair it had about 5,000 members, whose memberships I had to carry out, hoping for renewals, of course, and the American Surety Co. signed a bond that said Dr. C. E. Blanchard would do this. It is good to have someone to believe in us. It lends us backbone and multiplies our own self-confidence.

The institution was housed in a fine old dwelling, and arranged for 20-odd beds, with offices, dressing room, operating room, etc., very well equipped. The place was leased for a long term, and the furnishings came to me by the terms of the contract. It looked like a good scheme to me, and the amount I had paid for it was but a fraction of what the institution had cost. Besides, it smacked of humanitarianism—it was a co-operative brotherhood hospital. The plan was of the helping-hand variety. It served poor people who seldom had money to pay a doctor. Physicians who had worked there for salaries were not counted unethical, and numerous surgeons and specialists had attended cases there for the hospital company, and not a particle of stain was left on their "good standing" when the check was made out to pay their fees.

I know more about medical ethics now than I did then, and I know more about membership hospitals.

The hospital is a scheme to shift the care of the injured workmen onto the men themselves, who by the use of the insurance principle spread out the cost over a large number, making it easy to collect a sufficient income to pay for the service to those who are unfortunate enough to be injured or sick. It was counted "unethical" because it seemed to work against the financial interest of the profession; but its worst feature was that it sent out agents to solicit memberships. Though many shop doctors accept contracts at less per man than did the Emergency Hospital, these contracts are made with the employer or the liability company instead of with the employee, and this fact seems to save the day. Ethics is satisfied. The good dame is very punctilious. She is very exacting about forms. The employer might pay a doctor $2,000 a year to serve his men, which would be all right, but if the men passed the hat and collected a little from each, yet in bulk amounted to the same sum, and tendered it to the doctor, he could not accept it because it would be "unethical."

When I was nicely in the work and making a little money, I was urged by a classmate to join the medical society. As innocent as the unsophisticated usually are, I sent in my application and my fee. After waiting the usual time, I was notified that my name had been refused. Black-balled out, without a hearing!

I made some vigorous inquiry, and the best I could learn was that my rejection was due to my owning and conducting the Emergency Hospital. I also

made sure that this was the only and sole reason. Then I made special appeal to the powers on the throne. How may the hospital be changed and conducted to make it ethical? What modification of the plan will be necessary to entitle the owner to ethical standing? That was the burden of my broken heart, expressed in a formal letter to the membership committee. The answer was—Silence. I was condemned and cast out without trial or hearing.

Since I had not of my own accord applied for membership, it looked to me very much like a designed arrangement. The poor dog is whistled into the door, so you can kick him out. This was my first round with medical ethics.

I made good in the hospital work for two years. I lifted the debt in less than a year, added to my investment, bought some other property, and looked about for new worlds to conquer. In my second year I attended over 1,000 surgical cases, major and minor, and over 2,000 medical cases, mostly office work, it is true, but the surgery had a few abdominal operations, amputations, etc. I was surely getting on my professional feet.

In 1907 I leased a similar hospital at Columbus, Ohio, and later started another at Toledo, Ohio. I am not telling the story of these hospitals, and since I expect to quote enough of this history later, to connect my narrative, I will not repeat it here.

By the spring of 1908 I was again adrift. The Cleveland business was gone, and all I possessed was a part of the Toledo hospital equipment and a very

little money. Later, in Chapter VI, I tell of my experience in seeking a location in Colorado. I now come to the opening of my office at Youngstown, Ohio, September, 1908.

Youngstown is an industrial town, having iron and steel mills, and also other industries. It is the center of a population exceeding 125,000 within easy reach. Like all cities of its size and kind, it has both rich and poor—mostly poor. The pay day is THE day in mill towns. The people are encouraged and tempted by all manner of devices to spend their wages, and they spend them! Often they are spent before received. A town of this character is a good field for almost any business as long as the mills are running full blast. The deadest place on earth is a dead mill town.

By October 1st, 1908, I was again ready for business. My home and office were combined—a flat over a store, located as near the center of the town as I could afford. The location was not ideal, however, because of the long Market street bridge, at the further end of which and up a considerable grade, my place was to be found. Here I put out my sign and made ready for patients. In the next chapter I quote some details from a booklet I put out at the end of my second year, called, "Dr. Blanchard and His Story." In this booklet I did not tell everything, however. I did mention how I applied for a job to be accepted if I needed it. I had borrowed all the money I dared from friends and relatives. I had no credit at any bank. During the months of Octo-

ber, November, and December I had not taken in enough money to buy chewing gum for an active office girl.

I went to loan brokers and asked about getting money on my microscope. They thought I could, but I saw the lack of experience in handling that sort of security. Either the local doctors had no microscopes to pawn, or they had no need "to put 'em in soak." Either thought was encouraging. Such a piece of property had never been offered before, and I hope has not since. I did not pawn the microscope.

About the middle of December I decided to try working part of the time for a bad debt collection agency. I got the blanks, etc. and started out to work one of our suburban villages. I called upon a few doctors, some of them busy men. When I saw their offices, their tools, and libraries, I was disgusted with myself to think I should be forced to beg a chance to collect bad bills from men who had nowhere near as good offices as I had, and whose training and experience would not equal mine. I was thoroughly ashamed and discouraged.

I stood out in the snow to wait for a car to take me home. I was cold and hungry, also blue, both mentally and physically. The river was sweeping past where I stood, and the thought came to me: Would it not be better to sleep at peace, without pain and discomfort, down at the bottom of the stream? The Lord only knows how foolish my despair might have made me, had not a good little wife waited my home coming. As I have said before, we

all need someone to believe in us, and the best one to fill that office is a wife. Let us thank Heaven for the wives that believe in us, and let us seek to make good so well, that they will never regret having done so. Now, when I have thousands "who name me but to praise," and have only friends for patients, I do not forget the few who stood by me in those dark, down days. What should I have done but for their faith?

I have often wondered how little there would be of crime and suicide if the social system were based on scientific co-operation, with competition and profit eliminated, instead of the everlasting selfish struggle to get all we can and keep all we get, and not care how we get it, so long as we keep out of jail. Superficialists still hug to their bosoms the idea that competition is a blessing when, if the truth were known, competition is the curse of the world.

About the last week before Christmas the wife of unbounded (perhaps unfounded) faith in her doctor husband had secured a nursing case, she being a professional nurse, and I was left alone in my chambers to think out a solution of my problem. There I battled with what was to me almost a life or death question:

How can I make an honest living from the practice of medicine?

Not one year, ten years from now, not some other time, but at this time, right now. I imagine many other good men have the same problem to solve, some have had and others will have. It is a real personal

problem, and forces itself upon us with great pertinacity. There is but one solution, and that is the one that fits the man who is face to face with the question.

My wife's case was at a town some twenty miles out, and to brighten the day for me, the family invited me to join them at their Christmas dinner. The first week's salary, $25.00, was paid also that day, and the good wife put it in my hands to use as I thought best. As we talked the matter over by her little patient's sick bed, I told her I had decided to let the people know who I was, where I could be found, and what I had to sell. I proposed to do this by newspaper advertising, and set the fee as low as I could for cash payment. She said, "I know you will do what is right and best. I leave it all to you."

I had sketched what I proposed to say in my first announcements, which I called advertising "stories." These few samples received her approval and I came home feeling more like myself. Perhaps it was the good dinner, for it was the first good meal I had had since the regular cook had been away from home. Perhaps it was the general "Peace-on-Earth-good-will-to-men" spirit of the Christmas holiday. However, I am sure my better cheer was because of my certainty that I had solved my problem.

I realized that I had come to the parting of the ways. Ethics and I had had one spat before, but I had forgiven her. I had forgotten the swift kick she had given me, and for all I knew we were now good friends. But I knew my solution of my problem

meant an eternal good bye. I was of the same mind as the man who said he would rather be a live son-of-a-gun than a dead hero. I would rather have a decent income, and know I had honestly earned it, than to starve trying to gain a place by all the usual ethical maneuvers.

I believed I was right. Hundreds of doctors have since told me they thought so too. In another chapter I shall discuss my theory of ideal ethics, but here let me predict that the time will come when a doctor may use honest advertising to gain his business without harm to his good name and professional standing, the same as bankers, churches, and other business enterprises. I am paying the penalty for being a pioneer. Pioneers are sometimes scalped. There are some little two-by-four doctors of the ink-fish variety who would like to scalp me. Bless their hearts—I am sorry for them. I have gone out of my way to turn business over to at least half a dozen struggling brothers, in the few years I have been in Youngstown. When I was ethical, no one lifted a finger to help me. I called on a good number of my fellow craftsmen too, with an empty purse and near empty belly, which makes a sad combination.

Now that I had, at least theoretically, solved my problem, I was resolved to try it out. Only once did I waver, and the question of ethics was not the cause. I had my copy ready and my arrangements made with the newspaper. My first series of six advertising stories would cost about all of that $25.00 I had brought home Christmas day. I held the money in

my hand and thought of the long hours my wife had put in at the sick bed day and night to earn that money. To lose it in any experiment would be an unpardonable sin. Yet my firm confidence in my solution of the problem held me to my purpose, and but for this, I could not have felt worse to risk this money had I staked it on a gambling table.

Are you interested to read my first story, No. 1? It appeared Dec. 30th, 1908. On the 31st I had nine patients. On Jan. 1st, 1909, New Year's Day, I had fifteen patients. I have never wanted for patients since.

I remember the first patient that called, a cheerful old lady with eczema on her hands. "I saw your advertisement, and thought I'd call and see about my hands," she said. I could hardly keep from embracing her. I could have fallen on her neck and poured tears of joy down her back. After her departure I waltzed that fifty cent piece about the rooms, crying, "They are coming; they are coming!"

On New Year's Day the wife came home to stay, and the only case she has taken since is a chronic one called "Hubby," always hungry for home, music, and good cheer.

Now I will let you read Story No. 1.

My Foreword

I am going to write a series of advertising stories. I want to state my purpose. I want to justify my position. Why should a doctor advertise? He should not, if he has a good practice, after years of patient waiting. But how shall he gain a good practice when a city like this has one doctor to

about every 100 families? It has been claimed, too, by good authority, that doctors do not collect more than one-half their charges, and if this be true, it is up to about every 50 families to support a doctor. Now let your mind sweep over the situation. The older men, staid, competent and trusted—the busy men, they must have more than their share. Barking at their heels, is a pack of younger men, waiting for places now well filled. None of those now holding lucrative positions seem willing to "get off the earth" to accommodate the ever-increasing throng of intruders. So the competition waxes hot! To throttle competition in every open commercial sense there has been developed, a so-called "Medical Trust," and to disobey its "code," though your disobedience breaks no moral law, and is quite in accord with modern business-getting methods among bankers and commercial houses, is an unpardonable sin for an M. D. So it is amusing to see sprouting young doctors "mix" as they call it. They join this and that, sing in the church choir, hustle up and down the town bag in hand—they must not advertise.

Now, I am so situated that I do not care to wait. (I refuse to play the hypocrite.) I have decided to tell the public my name and address, offer my services as a general and special office practitioner, sell my services at half the usual price, that is 50 cent office fee, but collect it cash. I am going to throw in the medicine, too. I shall claim no unusual power to cure. I shall make no "bargains to cure." I shall say nothing about "my system," "my great discovery." I will not bamboozle the people either ethically or unethically. If enough people won't come to me at this price and pay cash, to make an honest living, then I shall turn my diploma and licenses to the wall and hunt a job. My stories begin tomorrow.

DR. BLANCHARD
517 MARKET STREET,
South End of Bridge.
Hours, 9 a. m. to 8 p. m. BOTH PHONES.

A man may be grateful for what he receives but it is difficult for him to be thankful for things that are withheld.

A man's chance in medicine is just about what he sets out to make it. No one has set a limit on your possibilities.

CHAPTER V.

HOW DOCTOR HOPEFUL'S PLAN PANNED OUT.

DURING 1909 my business continued to grow larger and my circle of acquaintance wider.

I kept up the publication of my "stories." These advertisements caused a great discussion and much editorial comment, and drew people from all the surrounding towns. While my regular fee was 50 cents "paid cash, medicine included," I published on the back of my cards the following schedule:

SOME POLITE HINTS.

My time is valuable, and to see a large number of patients each day you must help to economize it. State your symptoms or complaints briefly and concisely.

If it is a chronic trouble, you should be willing to keep regular appointments, and to show good faith, you should buy a treatment card. These cards are sold for 12 treatments. For ordinary cases the price is $5.00 in advance. In some special cases requiring both medicine and electricity or other treatment, the price is $10.00 for 12 treatments.

The regular fee is 50 cents paid cash, medicine included. No accounts kept, otherwise the fee would be double what it is. For first examinations, requiring considerable time and medicine the price is $1.00. When I treat two ailments a double fee is charged.

All surgical operations require a surgical fee, always agreed upon before hand and paid cash.

All fees paid cash, because thus the price is about half the usual charge, thereby giving you the benefit, instead of those who don't, can't or won't pay their bills.

This is the square-deal plan for an office practice.

Like other doctors I use many of these business cards, with these "hints" on the back. My pleased patients hand them to friends and neighbors who need my service.

I also found it best to use a treatment card, which was introduced before the end of my first year. I will reproduce this card, that you may study the psychology of the idea:

1	**SPECIAL TREATMENT CARD No.**.....	7
	DR. BLANCHARD	
2	**Youngstown, Ohio**	8
	Issues this Special Treatment Card at a reduced price for full payment in advance for TWELVE special treatments, including	
3	the medicines needed. The treatments are to be given on dates as indicated. This card is issued	9
	To	
4		10
	(*Address*).....	
5	and is a receipt for the payment in full. This treatment card is not transferable and is good only when signed and for continuous treatment.	11
6	*Dated*.....	12

These cards were and are sold to chronic cases requiring continued treatment. The purpose is to hold the patient, that is true but the real object of the card is to tide many over from one pay day to another. So many failed to appear for treatment, then afterwards came in to explain, "I could not come because I ran out of money," that it seemed necessary to invent some plan to avoid doing a credit business. They cannot spend the card, hence no treatments are missed. I can afford to make a slight discount for the cash in advance.

During 1909 my cash income reached nearly

$5,000. I lost two or three dollars trusting "dead beats" one fee each. At the close of 1909 I published my story No. 100, which I am quoting here, because it sets forth my platform fairly well. Reading the full set one has a book of medical history, said by some good advertising authorities to be the most unique advertising ever prepared. To convey to you some idea of what advertising men think of my work, I will also quote a clipping from **Printer's Ink**, written without my knowledge, by a special assignment of one of their staff.

Here is the Story:

ADVERTISING IN MEDICAL PROFESSION.

To advertise has been an anarchistic and quack idea among the medical profession for many years, and no item in the physicians' code of "ethics" is more stringent and unequivocal than the prohibition of advertising.

As advertising was practiced ten or more years ago by those who sought to cure human ills, and as advertising is even now practiced by those publications still without standards in censorship, the reputable medical profession could scarcely be blamed for firmly tabooing advertising.

But advertising as a method has, in plain truth, never been overlooked by reputable physicians. Not only do they use advertising methods in building up their practice, by social efforts and word-of-mouth recommendation, but great numbers of highly reputable physicians are keenly alive to the value of advertising of the printer's ink variety. Any newspaper editor knows how physicians and surgeons seek to get "a notice" when a successful operation has been accomplished, or an unusual medical case developed. The hospitals, too, have been eager to get "mentions" and some even have press agents.

Advertising As a Method.

Now in the face of this situation, and the general dissatisfaction among medical men at the overcrowded ranks of the

*Full sets of these stories may be obtained by addressing the author.

profession, the slow attainment of a paying practice, and the real need for getting the public to think along hygenic lines, it is refreshing to see a physician in good standing who has courage and insight enough to see that advertising as a method is perfectly clean and honorable in spite of past abuses; and that it is certainly more honorable and clean to come out in display advertising in a clean way than to cultivate friendships with reporters and editors and use other surreptitious methods of publicity.

The physician who has taken this step and proved it good is Dr. C. Elton Blanchard, of Youngstown, Ohio, who is using display in local newspapers that reads extremely well.

Dr. Blanchard is a general practitioner and surgeon, and sets forth no extraordinary claims. He began his active career as a medical man in Cleveland. After a number of years of indifferent experience with "newspaper" advertising, and the like, he became a traveling man for a medical jobbing house, making the rounds of the physicians and explaining the various properties of his drugs. He caught the fever and wanted to become a doctor himself. By dint of considerable privation on his own part and very little material aid from his friends, he finally graduated as a full fledged physician from a Cleveland medical school. Subsequently he became head surgeon in charge of the Cleveland Emergency hospital, having an assured income and reputation. Not long thereafter reverses of a personal nature came. He was compelled to relinquish what interests he had obtained in the hospital and begin his medical career elsewhere all over again.

Attracted to Youngstown.

He was naturally attracted to Youngstown, where he had spent the greater part of his boyhood, and he subsequently hung out his "shingle" and opened his office there. But the patients did not come. The census of 1900 gave the population of Youngstown as 44,885 and the directory for 1910 gives 80,000. Dr. Blanchard figured out that there was an average of one doctor for every hundred families in Youngstown. He also estimated that not more than half the doctors' bills were paid, so that it meant every 50 families had to support a doctor.

The prospect was not particularly promising. It was all very well for the long established doctors whose clientele had been developed by years of hard work, to say: "Don't advertise." But Dr. Blanchard was already well along in middle

life and he could not afford to wait. A little observation showed him, too, that it was only the paid kind of advertising which his ethical fellow doctors objected to.

Sent in Notices.

He found, for instance, that practically not one of them objected to having his name appear in the papers whenever it was connected with an important case. Indeed, inquiry at the newspaper offices disclosed the fact that many of the Youngstown doctors were making a regular practice of sending in notices whenever they had a big operation, especially if it was successful. He found them joining every sort of organization to make themselves known. This sort of medical advertising was "ethical" because it cost nothing.

Again, Dr. Blanchard found other doctors making speeches at medical conventions and later having them printed in booklet form and giving them wide distribution. He found them extremely anxious to get hospital appointments which paid nothing, but brought considerable reputation. They did not call it advertising, but he could not see it in any other light. "If I should take space in the best newspaper in town," thought Dr. Blanchard to himself, "the only difference would be that I would be fair with myself and the public in admitting I was advertising. I refuse to play the hypocrite." A little talk with the management of the Youngstown papers only served to substantiate his conviction. The result was that the Blanchard advertising campaign, which now has almost a statewide reputation, was launched just about a year ago. Today Dr. Blanchard has upward of 2,500 regular patients and is said to have an income of at least $6,000 yearly. He has the busiest office in Youngstown, with every modern appliance, including two telephones and a nurse. He has his own laboratory in which to make the usual medical tests.

To Two Papers.

The advertising was confined entirely to two newspapers, The Telegram and The Vindicator. He used from six to ten inches, as a rule, three times a week. During the year he used in all about 1,000 inches.

Stress was laid, at the very beginning, upon the fact that office calls (practically no others were accepted) were to be 50 cents each, medicine included, to be paid for on the pay-as-you-enter plan. The doctor reckoned that he would rather

have a hundred calls at 50 cents each and have them all paid for, than to have 50 calls at $1 each, half of which would never be paid. Consequently he continually harped upon that fact in his advertisements, adding: "A busy doctor is keen; an idle one is dull."

The campaign opened, with a foreword, shortly before the first of the year 1909. Returns began in the form of new patients almost immediately. It worked like a charm. The doctor's office was crowded. He made certain to impress his personality upon every caller, so that there would be subsequent calls, and so, too, that friends and neighbors would be told of "the excellent new doctor who only charges half price."

Every advertisement had a picture of the doctor at the top.

Much of the dread which many have in going to a doctor was dispelled by laying constant stress in the advertisements upon the doctor's great faith in the power of smiles and kindness. "I am constantly prescribing smiles and kindness," he said. "It makes life a glorious thing to live." And, when people read it, they at once began to think of Dr. Blanchard's office as a pleasant place to visit, as a place much unlike the usual dismal doctor's office. When next they, or any member of their family, had an ailment, it was ten to one that they looked him up.

Some 100 of Dr. Blanchard's little advertising stories ran in the first series. In No. 64 he came out with this statement: "I have now no longer need to advertise. I have a good practice. I owe it to these newspaper stories." But he has not stopped advertising by any means. He appreciates the value of continuity, of keeping one's name continually before the public. Since then a second series of stories have been started. They can now be found in the local newspapers at irregular periods.

Dr. Blanchard's reputation with the people of Youngstown has been established. Furthermore, if the humanitarian viewpoint is taken, Dr. Blanchard is today doing a larger and better work than he could ever have hoped to do in a quarter-century by the old methods of making one's self known. Many poor patients, who could not afford the higher fees of others, are coming to him and are being relieved of their troubles systematically and conservatively.

Says Dr. Blanchard of his experiences: "I suffer no personal ostracism, though officially I am doubtless not eligible to membership in the Elect Doctors' Club of America. My colleagues

treat me with friendliness and respect, such as I have been able to meet in my first busy year in Youngstown.

"I would not advise any doctor to advertise, nor would I advise every merchant to do so. If a doctor could write business-getting ads and had the skill to deliver the goods, that is, treat people successfully, get and keep their confidence, then I would gladly tell him what I have done.

"Doctors are working for a living. Many of them would give it up if they could earn a living any other way. My contention is, put it on a business basis. They could then give the people a square deal and get all or a part of the $2,000 a year for each doctor now spent on patent medicines.

"I don't know of any way to keep incompetent doctors from advertising, unless the newspaper will refuse space to doctors who cannot show, at least on the face of their advertisements, that they seek to treat the public honestly. Most of the incompetents are 'ethical' men who use that fact like a labor union man does his card, as a passport to the homes.

"Not all doctors are all-around men and could do everything from head to heels. Not all doctors could attend 50 to 100 patients a day, as I can with a nurse assistant. There are, however, one or two such men in every town of size in the United States who could do as well or better than I.

"If some strong advertising agency would take this matter up, there would be many doctors at it in the next five years. There are at least 500 towns in the United States large enough to make the plain a success."

Perhaps it will be of interest to the reader to reproduce the last of the series of "stories."

Story No. 100

I have now reached my 100th story. I have been nearly one year telling you the first hundred. There is more to say, and it may require another year to say it. It has been a campaign of education along medical lines and medical business. My position has been this:

Opposed to specialism, because it leads to grafting and belittling of the general doctors, the hard working, poorly paid family doctors.

Opposed to high-priced credit business, because it makes those who want to pay their bills pay double, and tends to run up needlessly large bills.

Opposed to "patent medicines" and doping generally, because people are not competent to diagnose their own conditions—neither is the druggist. Besides, taking medicine for symptoms is a waste of money and an insult to your stomach.

Opposed to drugless healing cults of all sorts, because, while able to do some things for some cases, the money temptation to treat diseases wholly outside the field of work each is competent to do, tends to make many drugless doctors degenerate into bamboozlers.

Opposed to making "bargains to cure" and "treatment by the month," because no honest doctor can promise to cure anything, and the monthly treatment plan is but a string to hold the patient whether he is pleased or not.

Opposed to "consultation free" schemes, because used by many advertising doctors to draw people into their offices, where by skillful "case taking" they can bamboozle good sized sums of money out of them on "contract to cure."

Opposed to bamboozling people whether the doctor uses advertising or not, because the doctor should be the patient's real friend and confidant, who gives good advice and counsel about private things, and who puts the erring and superstitious ones on the right track again, instead of fleecing them because they happen to fall a prey to fear and worry about something.

Opposed to using the cloak of "ethical standing" to cover many of these things done in private, because the medical profession should not be degraded into a system of graft and abused confidence. The doctor should be the true friend to whom people may go for real help for the physical ills of our kind, the same as they should be able to go for mental things to the priest or minister, or to the legal adviser for business advice.

Opposed to specialists who do little work but what the family doctor could and should do if he wanted. In some cases, if not in most cases, the specialist is the keenest sort of "fee getter," with no thought of the people's ability to pay, and many specialists, by commission schemes and fee splitting, degrade the family doctors into mere business agents, used to drum up trade.

Opposed to hospitals supported by the public, but run for the benefit of the 'staffs," thus practically excluding the rest of the profession by a system of favoritism; because hospitals

so run are not a fair chance for uplift and advancement to the doctors who do not hold staff positions.

Opposed to the usual advertising doctors' way of naming diseases as "specialties" and flaunting things of private nature in the public prints, trying to make the greatest use possible of the public notion that "specialist" means something great and wonderful that the family doctor does not know anything about.

Opposed to newspapers selling space to doctors who show on the face of their advertising that they are bamboozlers, deceivers, if not actually defrauders.

Opposed to anything and everything that cheats and imposes upon the people when they come to the physician with trust and confidence.

Opposed to anything and everything that lowers the most noble and self-sacrificing profession in the world, unless it be the clerical, and tends to degrade it into a licensed system of trickery, thus bringing reproach upon the many honest, earnest men because of the unworthy acts of the few.

So this has been the burden of my message to the people in the 100 stories that have thus far appeared. I have felt malice toward none. I have not aimed at men as individuals. I have hit at a system of methods I know to be wrong. My fight has been for the honest doctor, for the people who need his services, and for better business methods between them.

What has been the result? I have been misunderstood, as I expected to be. I have been poohpoohed and laughed at by some of my punctilious brothers, who are so hide-bound and thin-skinned they are almost ready to burst with their egotism. I have been called "unethical," as if "ethics," like a church membership, was a sure passport to heaven. I have been called a "rate cutter" by some, a "fifty cent doctor" by others. Such people, doctors or laymen, would have been the first to throw Columbus overboard had they been on his ship, the first to lay the lash on Galileo's back because he said the earth was round. I have so worried some other advertising doctors that a few have left town for want of business, seeking new fields to make "contracts to cure." One has written me threatening letters and so misused the mails that if Uncle Sam had what is in my possession he would very likely land him in the pen. Some have dug up and gossipped about my private and family affairs, and sought to make capital of my past,

which I again say is an open book. They say what they say, let them say. I have no use for enemies but to forget 'em.

The real result is: I have won the approval of the honest physicians, both here and far and wide. My campaign of education is fast raising a national question, that is, how to put the practice of medicine on a right business basis. I am writing for several medical journals, and am soliticed to write for more. I have so won the confidence of the people that I am busy from morning till night, doing the best I know how for those who seek my help. Every day I am asked to make calls at the homes, which I am unable to do. I am making a living, buying new equipment, and saving a few dollars for "the rainy day." People pay me cheerfully and become my friends. They send me others who need my help. If I fail to help anyone, he has no unkind feeling, for I do the best I can for everybody. Some might do better; some might do worse. I am the People's Doctor.

If I could reach everybody as I have the readers of the *Vindicator*, no doctor in the city could make "contracts to cure," nor treatment by the month, whether he advertised or not. I feel sure that, as it is, some will have to change their methods, or people will not employ them.

Having accomplished all this, I hesitate about advertising any more. We have had many pleasant smiles together, my "constant readers" and I, and I may miss the writing more than you will miss the reading. However, I shall think it over for a time, anyway. If I see symptoms that demand my sort of treatment, I will begin again. I make no promises either way.

I would remind you again, it is a good world if you know how to get on the right side of it. Health of body and mind is our first duty. I shall keep on doing the best I know how for you and your friends, if my help is needed. The fee is, as said 100 times, 50 cents paid cash, medicine included. I do everything from head to foot. At your service.

DR. BLANCHARD,

517 MARKET STREET,

South End of Bridge.

Hours, 9 a. m. to 8 p. m. BOTH PHONES.

I continued my stories during 1910, using about 75 instead of 100, and to supplement my newspaper publicity I prepared a little booklet which I will quote in the next chapter, 10,000 copies of which were delivered to the homes, one at every house. I am still getting results from it, at this writing, January, 1912. It is the only advertising effort I have used, aside from my newspaper stories. Even at the expense of repeating some of the facts and incidents of my experience, I venture to offer this booklet as a part of my narrative. Mr. W. T. Wells, Pres. The Columbus Pharmacal Co., who now sleeps in his grave, a good man and a loyal friend, said it was the best bit of personal advertising he ever saw. All I know about it is that it brought me hundreds of new patients.

Keep moving. Things move so fast these days that people who say "it can't be done" are interrupted by those who "do it."

CHAPTER VI.

"DR. BLANCHARD AND HIS STORY."

THE fair thing to do is to announce your intention. If a man is going to make a political speech, preach a sermon, or tell a story, he should let us know in advance. We may then give him more intelligent attention. Those who do not care to listen can walk out or stay away.

This is to be a story. It is more than a story—it is an advertisement. The purpose of this story or advertisement is to put before the public certain facts regarding my business and my history, to set at rest those gabbling tongues who have the talk habit, and who do not always know what they are talking about. Incidentally it may fall into the hands of people who do not understand the meaning of that term, "an honest advertising doctor," and who will be impressed with the facts herein told. If so, they may be able to appreciate the efforts of one doctor to put the business of medical and surgical practice on a business basis, applying to it the principles of good service and good management, the same as a banker or a merchant, yet holding to that spirit of helpfulness which has so long given dignity and character to the medical profession. To help people is MY WORK.

Two results are expected from the publication of

this story: New friends and patronage, because advertising always makes a wider circle for any business man who uses it honestly. The second result hoped for is to make clear to the public my position as an honest advertising doctor, and to show why I use the plan of practice that I do, which is quite unconventional and without precedent among doctors, who try to fill their positions in a community with dignity that commands respect, honor, and appreciation almost without exception. Understanding this will prepare you for my critics when they come along, for every man who dares to think for himself and do anything different from the rank and file has critics. This has been true from time out of mind. It always will be true, no doubt.

So much for a starter. A starter is sometimes called a prelude. It is the soup before a full dinner.

The writer was born of "poor but honest parents." The family for several generations has had the work habit. My grandfather hated some things as much as he hated the devil. Among these were whiskey, debt and laziness. Only those who knew how to work, keep sober, and pay their honest debts succeeded in those early days, about the time Ohio was admitted as a state, around 1800 A. D., for that was long before modern grafting had been developed into a fine art.

It was with brain and brawn that the farm was cut out of the woods along Grand River, Orwell Township, Ashtabula County, Ohio, and it was there I came on the scene of action, August 29th, 1868.

My earliest remembrances are of the fields and woods along this rambling stream. I knew the haunts of fish, the best swimming holes, and when school and "chores" permitted, the boy was close to Nature's heart, learning her secrets. There was no vivisection with us. We skinned and cut open the wood-chucks to see how their internal affairs were arranged. We collected beetles and butterflies. We had a menagerie of small animals in cages of our own making. The fox-squirrel has long sharp teeth. This was first discovered by actual experiment. The polecat is an animal best observed at a reasonable distance. This discovery was made by the same method.

At sixteen began the experience as a teacher. The district school, at 75 cents a day, was the first arena of my pedagogical career. Alternating between teaching and being taught for a number of years, I finally landed the public school superintendency of a fair-sized town. My teaching life ended at Corvallis, Oregon, in 1893. The five years I spent on the Pacific Coast were years of profit and growth.

In 1894 I settled in Cleveland, and in 1896 entered the College of Physicians and Surgeons, now combined with the Medical Department of Western Reserve University, and graduated in 1902. Not being a remittance man, I had to work my way as best I could, and support my wife and two children at the same time. I was therefore six years in completing the four years' course. During this time I was a drug salesman, advertising writer, teacher, or whatever I could turn my hand to, to earn an honest dollar.

Thus I had a course in the University of Hard Knocks while taking the medical studies.

When I finally received my "sheepskin," and was ready to settle down, I opened an office in the down town section of Cleveland—and waited. I had as much waiting ability as the next one, but business did not come, though I waited meekly and murmured not. At last opportunity knocked at my door. On good credit and very little money, I bought the Emergency Hospital, located on E. 55th Street at Hough Avenue. There I made a reasonable success both financially and otherwise. This hospital was an institution supported by a membership plan, especially designed to serve sick and injured factory people. The plan was right and humanitarian. Each member paid $3.00 a year, and in case of accident received full care until well. Some 7,000 men and women were under its protection. My last year at this institution I served about 3,000 different patients, over 1,000 of which were surgical cases, major and minor.

The hospital was not considered "ethical," however, by the Cleveland Academy of Medicine, and I was not allowed to join the society, though the secretary, a classmate of mine, had pressed me to make application, and some of the best men worked with me and for me, as cases at the institution demanded. It seemed ethical enough to take fees from the Emergency Hospital, and individually they said it was all right, but officially and collectively they boycotted me, because I owned and conducted it. This

proved to me how broad-minded and fair doctors are, as a Guild.

In 1907 I assumed charge of a similar institution at Columbus, and later attempted to start another at Toledo. For me at least, both of these enterprises were failures, and I lost about all I had formerly made. Because of this and other troubles, Calumny and Contumely, you know these people, camped on my trail for two years. It is so handy to kick a man when he is down.

At Toledo, April 27, 1908, I married a second time, and taking a trip through Colorado to study tuberculosis, we would have settled there but found no place suited to our needs and condition. I therefore returned to Youngstown, Ohio, where 22 years before I had worked as a carpenter during vacations, for my father, who was then a contractor here; and in October, 1908, I opened my present office at 517 Market Street.

This in brief is my life history, omitting side issues of no importance. That is, it is the story to date. It has been all of it an open book, with nothing to hide or cover up. I made the usual number of mistakes, but I tried not to make the same mistake twice. I made and lost several small fortunes, lost often because I banked on the word of others. All I made was obtained honestly. All I lost was lost cheerfully. No soured tight-wad for me. I have no use for money but to spend it, except that I do think every man is justified in trying to save a little for the "rainy day" that comes sooner or later to us all.

From October, 1908, to January, 1909, I pondered on the practice of medicine as a business. That was all I had to do—ponder. I went about somewhat and got a fair estimate of my fellow physicians. I saw who was it, and who was not. I realized also, more fully than ever, how medical practice is one of the games of life where every fellow wants to be IT. I saw how a certain few had a cinch on the two hospitals, so that while the public supported the institutions, no one but the staff had any fair show whatever. I saw a few men serving the mills and factories. A few others had the railroad and street car business. I counted the names, and divided the population by the number of doctors, and was surprised to find one doctor to about every 100 families. The facts in the case gave me a chill. I had about the worst case of cold feet any doctor ever had.

I found my brother doctors all good fellows, who give you a glad hand and tell you, "Yes, sure, there is room here for another good man." The "room" was hypothetical, like a chance to get on a rush-hour street car. There is room if you can crowd and push your way in. I knew these same doctors said to themselves, "If you break in here you will be a dandy."

I stood many days and saw the streams of people passing over the Market street bridge. I knew many of them needed my help, and I needed the money they would pay me. Why could we not get into touch? Why did they not come? I had hung up the usual doctor's signs. I had telephones. I walked about,

went to church, theatre, and the usual decent places where I might become acquainted with people.

I had a good office, with all the latest electrical and other modern appliances. My surgical tools, collected during my extensive experience in the Emergency Hospital at Cleveland, were better and more complete than any I saw in my many perfunctory calls on other doctors.

The "chill" before mentioned grew worse instead of better as weeks passed and no one wanted my service. I thought of hunting a job, and did actually make tentative applications for work as a drug salesman, such work as I had done during my student days. During the last part of December, '08, I was alone in my rooms, the wife, being a professional nurse, having accepted a call at Salem, O., and there came to me a little book called "The Magic Story," sent by a friend in New York.

In it I read:

> "Man should not be blinded to whatsoever merit exists in the opportunity he hath at hand, remembering that a thousand promises for the future should weigh as naught against the possession of a single piece of silver."

It dawned upon me that my opportunity at hand was to get in touch by some way with good people who needed my help. I knew all I lacked was to let people know who I was and what I had to sell. I believed in advertising, and that advertising would do this for me, but I hesitated about joining the ranks of

advertising doctors. I believed and still believe that most of them are fakers, making promises they do not know they can fulfill, and, by contracts-to-cure schemes, taking from people money that is not honestly earned. "Consultation free," "no-cure no-pay," and all that, are but the bait that covers the hook for suckers. I disliked to join the advertising ranks—in fact, I did not join them. I had to create a new sort of advertising for doctors, a new plan of business—a square-deal plan, that has won the hearty approval of the public and is now being rapidly adopted everywhere by live doctors who are so placed that they need more work.

I remembered how I had been treated by the "ethical brothers" in Cleveland because of the Emergency Hospital work, so I did not try to join the doctor's trade union here, though I had an invitation to do so from the president of the society, before I began to advertise.

I had and still have nothing but good will for the motives of the doctors' organization, for I know that contact with our fellows makes us grow and advance. The brotherhood is also helpful socially and professionally.

When I was in Colorado in 1908 I took the state examination to secure a state license there (and I got it too), and the secretary's office wrote back to Cleveland to learn my history. One of the leaders, a man who gets more newspaper publicity than any dozen other men, and whose picture was spread over the front page of several newspapers of wide circulation

when he was called in council by a great railroad magnate, replied to the Colorado folks, "No, Dr. Blanchard is not a member of the society," but he did not go on to say why. He did not say I was "black-balled" because I conducted an institution to help poor folks when they were sick or hurt, at so nominal an expense as $3.00 a year. He did not say this was the only reason; that I had led a clean life and had no record but that of earnest, honest work. The only help he gave me was by reason of what he did not say.

You know how the taste of an injury or injustice lingers in your mind, like eating onions. Some people like to keep revenge and bad feelings toward others, but I have no use for enemies but to forget 'em. I had a great admiration for this doctor who does things and gets wide publicity for it. All I wanted was to be let alone and allowed to earn a living by the work for which I had spent so much time and money to prepare myself.

To this end I formulated my advertising plan for doctors. As business men, physicians have not passed the get-what-you-can age. Nowadays, good business men have a one-price system. You go to the store to buy a hat or suit. If the merchant asked you twice what he would be glad to take, then haggled with you like a peddler, you would not have much confidence. He would be like the Jewish merchant who said, "Dis suit of clothes is thirteen dollar. Ve vill not take one cent less. Vat will you give?"

I believe doctors should have a one-price plan, as

far as possible, and for all work where it is not possible, like surgical work, let the price be understood before the work is done. In the main, most general men try to establish a schedule of fees and live up to it.

In all my publicity work I have nothing but praise for the hard-worked, poorly-paid family doctor. Most of my complaint has been made against specialists and surgeons who often bamboozle the people and seek to degrade the family doctors into being business agents for them by fee-splitting and commission-baiting schemes.

My only criticism of the family doctor has been that he does not wake up and do all his own work for himself; that he is not a better collector and does not make everybody pay instead of collecting his entire income from about half his patronage, which, I have argued, is a poor way to put a penalty on honesty and a premium or reward for the dead beat. However, most doctors, like other folks, do the best they can. Some are learning better ways.

In the study of advertising I saw that every doctor advertises in some way. When he rides about in his auto; when he goes to church or any public place; every move he makes is an advertisement. Some sing in the church choir for advertising purposes. Thousands of doctors have appreciated the value of advertising and publicity, and many have secured it by more or less hypocritical means. Some have worked the case story scheme and had their

"wonderful operations" told in the newspapers. The news-hungry boys on the papers were easily hood-winked. In large cities they have what they call "the dollar a line" system. The newspapers will print as a news item some doctor's great discovery or what-not, to get his name and address before the public. Many foreign doctors have worked this in the New York press to gather shekels from American visitors abroad. Some doctors are very skillful in cashing the church membership and lodge pass-words.

It seemed to me that many doctors used any and every questionable scheme to get business, which did not compromise them ethically, and did not openly and honestly buy and pay for newspaper space, as a bank or merchant would do. I called this hypocrisy, and it seemed a strange state of affairs when men wear the cloak of ethical cant to cover up secret schemes for bamboozle. I said all these things in my advertising. This naturally caused resentment by some, for it is "the hit bird that flutters." The honest men of the profession told me by letter and by word of mouth that I was right, and some said, "Bully for you!"

I looked upon advertising as a dignified and honest way to get business. I saw the best merchants and bankers using it. At Denver I attended a church because I saw its advertising on the billboards. It was the happiest, liveliest church I ever attended, and the house was packed. Joy and good cheer radiated everywhere. It surely pays to ad-

vertise a church. In short, advertising is merely telling the public in your own way, who you are, what you have to sell, and, if possible, the price.

The price—that was the sticker for me. I expected to do as good work or better work than almost any other doctor. I found by careful study that on the whole, doctors collect about one-half of what they charge on their books. The usual office fee is $1.00. Some write a prescription, others dispense the medicine. I decided to collect from everybody, include the best medicine I could buy, and charge but one-half the usual price, that is 50 cents. I pounded it in, this fee—"50 cents, paid cash, medicine included."

People have been humbugged so much that my proposition was a good deal like trying to sell good gold dollars for 90 cents each. It looked too good to be true, especially when I had no extras for anything except surgical operations. If an operation was needed, I always agreed upon a price (paid cash), and made it as low as I could consistently with getting a reasonable sum for good work.

When people found I had no extra charge for electrical treatments (except X-ray examinations), massage, vibration, light-therapy, etc., they were agreeably and happily surprised, and many said to me, "What a blessing it is we have such a doctor as you to whom poor people can come for good service."

Because I included the medicine and talked against people buying and using "patents," the druggists, some of them, called me a quack. I said

people should not spend their money to buy patent medicine, for they are not competent to diagnose their own cases, and great harm may come from using indiscriminately all the dope that is sold as something good for this or that symptom. I called attention to the many who acquired the whiskey or opium habit because of some patent medicine. I said it was a shame that people spent for patent medicines $2,000 a year for every doctor in the land, when this would employ a good doctor, with better results for all concerned. Yet, I admitted that doctors were themselves largely to blame for the present condition of things, because they have sacrificed the confidence of the people by unfair and slipshod methods of business.

It was because of all this the druggists joined with the advertising fakers, who consult free and contract to cure, to knock Dr. Blanchard.

I also explained "drugless healing" and told the people that while osteopaths, mental healers, etc., could do some things successfully, they are prone to claim too much and to undertake, because of the fees, cases that they should not attempt to undertake and would not if they were really honest about it. I told a few case stories to illustrate. This was touching the pocketbooks of the "drugless cults," and naturally they did not like it. Burglars hate policemen who interfere with their business. I could not consistently be a party, even by my silence, to what I know is wrong, and I know of hundreds of cases that healers of the several sorts

have taken and promised to cure because they could collect a few dollars.

An honest doctor cannot promise to cure anything. He can promise to do the best he knows how for each patient—that is all. He may assure the patient of a reasonable hope of success, judging from the nature of the trouble and his past experience; but to treat by the month or for a settled sum of money for a cure is not honest, and I condemned it with all the power I had.

Yet many people want to buy a cure, and some doctors often let them delude themselves, instead of correcting the patient in his wrong attitude. By this the doctor may gain a few dollars for the present, but the whole medical profession is today suffering to a great extent because of this thing—disappointments and money loss, where hope was made strong by the doctor's unjustified promises. Every day some one asks me, "Now, doctor, what will you charge to cure me?" This would be the dishonest man's cue, and he would make a bargain. I say, "You are foolish to ask that. My fee is fifty cents each time, and I will do just the best I can for you, whether it takes one call or fifty." I want medical practice to be an honest, dignified business, instead of a mysterious profession promoted by secret schemes.

So I settled the fee at 50 cents, paid cash, medicine included. I believed by advertising I could get a volume of business and make more than by the old plan of working each case, making all the calls it would stand, etc., throwing all the burden possible

upon the good-paying people, and letting the no-goods go free. A street car makes more money than a taxicab, and a nickel fare from a large number is better than a dollar fare from a few exclusive individuals. I then decided to give my time to office work, making the day long, from 9 a. m. to 8 p. m. and I knew I could attend a larger number and do it well, than if I cut the day into parts. I counted on being able to attend forty or fifty a day, which, with now and then a surgical fee, would give me a larger income in the aggregate than the high-priced men who worked on the taxicab principle. Some days I have attended sixty and seventy people. One day the number was seventy-two, the highest number I ever treated in one day. I tried, in all my publicity, to gain the public confidence. I knew that I deserved it.

There are some doctors who characterize themselves with high sounding terms and labels. They use fine-spun theories about "Nature's force modalities," and all that. These they talk with great enthusiasm, and succeed in some instances in cashing a considerable sophistry. First it is one thing, then another. Yesterday it was the static machine, now everywhere sold for junk. Today it is a wonderful ozone machine that cures everything, a lymph cure, or what not. Tomorrow it will be something else, all designed to sell to doctors for high prices and to be used by them to extract money from people seeking to buy a cure. Often the higher the price, the more confidence it commands. Thousands of people

judge quality by price, and many a tradesman has used this fact to good advantage.

Some people have said, "Dr. Blanchard is too cheap to be good," not realizing that a street car makes more money than a taxicab.

Thousands of people are fooled in this way. Many doctors piece out their incomes by the argument: "I have a most expensive office. I do the best work, and I use the best materials, hence I have to charge more than the common sort." People believe it too, and flatter themselves that they are just a little better than other folks. The truth may be that this doctor has no better office and does no better work than the run of good men, who make no bluff or bluster about it. I have known opticians to talk for an hour about the quality of glass they used in lenses, and get two or three times as much money as they should for the usual grade of glass used in all lenses. This is properly called, "The Art of Cashing the Bluff." I will have none of it. Unless you are one of that class of silly-minded folks who like to ape aristocracy, and care more for pretension and ostentation than you do for the sound realities of life, you will agree with me. We hate sham, bluster and bluff.

Some people have said, "Dr. Blanchard must give out cheap medicines." One good lady told this as if she knew it was true. She told it so many times that no doubt she came to believe it. You know after a real-thing gossip has told a false story about her neighbors she has firm faith in its correctness. I use only the best drugs I can buy, because I must get

results, and I must succeed or my patients will not return or recommend me to their friends. I have no other hold on them. I put my work on its own merit, and on that I stand or fall. No strings, like monthly treatments or contracts to cure, or bills run that place the patient under obligations to me. No one owes me anything. If patients are not pleased they do not have to come back. If this does not show good intent and good faith on the face of it, I should like to know a better way.

Naturally, as I began to succeed and my patients numbered thousands, coming from towns all about as well as from Youngstown, doctors began to sit up and take notice. The local guild was divided into two camps, those who agreed I was right, and those who called me a "rate-cutter," "a scab," and all those nice names which indicate you are not keeping goose-step. Some doctors said, "He won't last long here." They did not know I had come to Youngstown to stay; that Youngstown is to be my home, my town, at least until I am too old to work any more; then I may go up to the farm, at least summers, and be a boy again along the banks of old Grand River.

It was in January, 1909, that my "stories" began to appear. During that year I published 100 story-advertisements. I told these stories as well as I could in plain words. No one could claim for them literary art or perfection. Each one was a psychological study intended to carry a point. I made it clear that

I did all kinds of office work. I emphasized my work on the eye, fitting of glasses, etc.; on the ear, nose, and throat. I covered all the special fields. I had spent months preparing to do this work, and I knew I could do it as well as any so-called "specialist" at least in my field. I had a message for fat people. Ambulant surgery, genito-urinary, and diseases of women and children, as well as all the general run of chronic troubles—all were mentioned time and time again, until people came to know that I was ready to do anything that was needed and right to do. I drew the line, however, on a few things a doctor is often asked to do, that are not legal or right.

I have treated all alike. American or foreign born, softhands or hardhands, with diamonds or rags —all looked alike to me, just human beings needing help. Many a poor drunkard has thanked me for getting him on the right road. The poor girls of the "under world" have told me their stories; the lady from the avenue, farmers, millmen, anybody, everybody. I talked hope and cheer, and radiated confidence and smiles. They paid me cheerfully and came back again until well. Neighbor talked with neighbor and read my stories. When I had done well by someone they knew, as need arose they came also.

Thus my circle has grown wider and wider, until now at the close of my second year I have treated over 3,500 different patients. This is not many, but it is quite a good number for one small doctor to reach in less than two years, beginning with none.

In the past few years the business world has adopted a new code of ethics. It is the sort which says, "Money back if you are not satisfied; one price to all, and marked in plain figures." Goods not sold until the customer is satisfied. Advertising has become the salesman.

The medical profession must either become a public function as a part of government service, or it must adapt itself to business conditions as they are now. So long as people look upon the work of a doctor as a business proposition, it is useless for the doctor to hug to his bosom that noble idea that he is a professional man, and professional men are not like common business men. Such sentimentalism smacks of that spirit of English snobbery which looked down upon a "common tradesman." I would rather be a merchant prince, like Marshall Field or John Wanamaker, than be the greatest nabob prince of all Europe. The people demand a square business deal from doctors, and they don't like the plan of getting an income by hook and crook according to ethical professional methods. When doctors look upon their work as an honest, dignified business, the people will pay the same respect to a doctor's bill that they now pay to a butcher's or grocer's.

The only man who does not need publicity is the one who is dead, or if living he should be a retired millionaire, living on his "tainted money." All live men need publicity. Even the dead advertise on their tombstones, but to get any good from advertising a man must be alive—alive in more senses than

one—he must be alive to the needs and wishes of the public; keen to keep his promises; to deliver the goods; to make every patron a pleased patron. This has been my constant effort; to improve myself, my office, my tools, my service; to dispense good medicine, good advice, plenty of cheer and smiles.

I have made in two years over 3,500 friends, and a man with that many friends is rich. Even when I failed to help a patient because he had some incurable trouble, he was still my friend. No bad feeling, no disappointment. The effort was worth all it cost, no promises broken, promises made to get the money. I promise only one thing: To do the best I know how for everybody. This is usually as good as any and a great deal better than some.

This plan of mine is not new. It is based on the principles used by any successful business man, adapted to a doctor's work. I could and may apply the same plan to a calling practice.

I am constantly opportuned by doctors everywhere to give them the idea. This I am doing, and in a few years every city of size will have one or more honest advertising doctors. Every now and then a physician comes to Youngstown to stay a few days with me to see how it is done; then he goes home and does likewise. I have them scattered from San Diego, Cal., to Bangor, Me. There will be 500 or more of these honest advertising doctors in a few years.

This will tend to correct the use and abuse of newspaper space by doctors who bamboozle the peo-

ple. Some fakers will reform. Some few using my plan were formerly the kind that said, "Consult me free." Dishonest advertising does not pay either a doctor or anybody else. Before long a doctor cannot buy space unless he intends to treat the public fairly, for the newspaper is a party to the wrong if it allows men to insert advertisements that will not bear the light of investigation. I have repeatedly challenged the other advertising doctors of Youngstown to let a committee appointed by the Chamber of Commerce investigate our business methods, agreeing that those they found other than honest and above board should be closed up, the same as a lottery or bucket-shop would be. Every fact of my business is open to inspection, except the professional secrets of my patients, and if one cent of graft or bamboozle is found I will multiply it by ten and refund it. Is there another advertising doctor who dares to say the same? Yes, and more than this, many who don't advertise could not stand the spot-light of investigation.

This is the first piece of advertising matter I have ever used outside of my newspaper "stories." I have never used letters or testimonials. My patients, as a rule, speak well of me to their friends. I have often said, "My patients know what kind of work I do. Ask 'em." Any doctor could select a few cases, and make capital out of what they might say. All this scheme of testimonials suggests the charlatan. I have many mothers who have said I saved their

babies' lives. I would consider it foolish to ask them for letters and twang on that string until you might be led to think I was a "baby specialist" and could perform miracles which no other doctor could do. You may reach for the salt when a doctor tries to make you think he knows more than the general run of competent men. All this talk about "my system," "my discovery" and such, is tommyrot. All doctors legally registered are competent men, some a shade keener in this or that way than others, but all good men. I have never laid claim to any superior skill over my fellows. We all have our successes and our failures. Most of us make mistakes, and yet I believe all do the best they can in every case.

The purpose of my advertising is to teach the public my name and address, also to show on the face of it that I use an honest plan of business, so that anyone may come to me for help with a certainty of fair treatment. The fee being paid each time, no one need come back if not pleased. I do not collect as large a sum as I can to insure a hold on them.

This is quite a different proposition from "consultation free" and all that which is designed to get you into the doctor's office so he may "take your case" and get your name on a contract, a note, or a payment of some size to "cinch" you for a cure. So long as a certain number of people are looking for a chance to get something for nothing, these doctors will find their victims, though the picking is not as good in Youngstown as it used to be.

You will understand me, I have nothing personal against any physician, ethical or unethical. I am against the methods used. I am fighting for a square deal for the people, which would do more to restore public confidence in the profession than anything in the world. It would please me mightily to see all advertising doctors come out square and fair, name a set fee, and bid for business by honest methods.

Thus I am doing MY WORK. Blessed is the man who has found his work, and does it with joy in his heart. My work is to serve all sorts of people, with all sorts of ills, and I do it the best I know how. Every year I know how better than the year before. I am 42 years old, but still growing.

It is a good world, if you get on the right side of it. The right side is the best side. My few short trips on the wrong side have been plenty enough for me, thank you.

This is the story I wanted to tell you. Herein I have set forth all the essential facts of my life and my business. I have a large practice because I had good work to sell and I let the people know it. I offered this work for sale by a method that was so fair and right that people found nothing but approval. If anyone states anything contrary to what I have herein said, he is either mistaken or lying—take your choice.

By and by, when we have moved about a while in our little circles, you in yours and I in mine, we come to the end of the game. I want no better honor than

that those who have had my service, and who know me as I am, should gather at my grave to say, "Dr. Blanchard helped me."

Here ends my advertisement.

C. ELTON BLANCHARD.

"Nobody ever becomes a nervous wreck while he is succeeding, no matter how hard he works. He goes by the board only when the tide turns against him or when he quits work to have a good time."

When we encounter a man who is long on words and short on works we wonder how much his wife earns by taking in washing.

CHAPTER VII.

HOW TO DELIVER THE GOODS.

LIKE a popular brand of baby food, doctors are "advertised by their loving friends." Every physician gains more or less of his patronage by this word of mouth advertising. It is ethical because beyond his control. He does not buy it and pay for it. He is supposed to be indifferent to it, and to know nothing about it. It is the most effective business-getting agency we have. I have known some men to organize it and reduce it to an efficient system. These knowing doctors select for each neighborhood one of those neighborly, talkative busybodies, who attend to their neighbors' affairs better than they do to their own. This good woman is the foster-mother of all the young wives, and grandma to all the sick children; her head is full of wisdom, and her heart of motherly kindness. She makes the teas, plasters, and poultices. Her weather-eye is keen for danger signals, and when she says, "You'd just better call the doctor," called he is forthwith.

She is Doctor Everready's best business agent. His arrangement with her is innocent but effective. He has her fullest confidence. Once she had a little bill to pay him, and was agreeably surprised when the good doctor said, "Mrs. Hardpelter, you have

done me lots of good turns up in your neighborhood and I appreciate it. I want you to keep on thinking of me when anybody wants a doctor. This bill is more than paid. If you or any of your folks need anything let me know, for I still owe you a good deal. And by the way, Mrs. Hardpelter, let's keep this matter between ourselves, because it may save trouble for us both." Then he gives one of his knowing winks, and a smile that says much. The doctor is "such a cut-up" Mrs. Hardpelter says.

Now Mrs. Hardpelter and her kind do not need to be hit with a brick before they can see a point. The good Doctor Everready has several of these wise friends in different sections. They work while he sleeps. He can't help it if people just insist on his taking a case. His popularity is wonderful; his success, marvelous; his failures, unavoidable. He stands high in the local society; his "ethics" are as clean as the character of a new-born babe. If his colleagues do not employ the same kind of agents, or some other kind, they can not hope to compete with the many Doctor Everreadys throughout the land. The practice of medicine has degenerated into just this sort of scramble, each doctor working his brain to invent some one or more business-getting schemes, that will not be found out to his "ethical" undoing.

I could fill the remainder of the space allotted me for this book, analyzing and illustrating the numerous and subtle business schemes employed by so-called "ethical" doctors, to get business away from their competitors. Yet they tell us medicine is not a

business, it is a profession. As I see it now, it would be to the credit of doctors if as a profession it had more of the common characteristics of honest business.

I am trying to write a helpful story, so incidentally, to justify my position and my conclusions, I must digress a little. I have nothing but compassion for the struggling doctor. He does the best he can and follows the line of least resistance, trying to make a living with the minimum of burden on his conscience. Usually he justifies all his tactics by the comparative method, and claims the right to do what others do. Let the mantle of Charity fall and cover all these things, for Charity covers a multitude of sins!

It is true that many people send patients to me, but I do not reward them any more than to say, "Thank you, I'll do the best I can to make them glad you sent them to me." I do not organize this into a "Doctor Everready Pluggers' Club" and institute an order of walking delegates for doctors. I knew a couple of doctors who took the agency for a wonderful lymph cure, and got after all the nurses, bathhouse attendants, masseurs, etc., in the city, who were to have a commission of $25.00 for each case brought to the doctors for treatment with this lymph. Neither of these men lost their "good standing;" both prospered and waxed fat.

When I resolved to openly bid for business, I said good bye to every covert method commonly em-

ployed, a sample of many hundred of which I have tried to illustrate at the opening of this chapter. I determined to do the best I knew how for everybody, and have studied to know better every year. I read many of the leading journals, and have always been a chronic book buyer. In fact, I have often bought books faster than I could find time to consult them.

If doing the best I know how, or can learn how, does not succeed or does not please, then I want my patient or his friends to employ somebody else. If my work is satisfactory, I feel confident that my patients will count themselves my friends, and will refer other people to me. I do not hesitate to give each a few of my cards, and I say, "If any of your friends or neighbors are sick, and you feel willing, hand the sick one my card. I will do the best I can for him."

I do all this openly just as I use newspaper advertising openly. I want people to understand that I am looking for business. I have no need to cover up my desire. I am not ashamed of my business any more than I am of my profession. I have no fear, and no "ethical standing" to jeopardize. The peculiar nature of my newspaper stories creates a class of "constant readers" who do not need my service. Many of these send patients to me, though I have never met them personally. A man's reputation for skill and fair dealing spreads all through a town, even a large town, and the doctor who thinks he gains anything by bits of sharp practice, deludes himself.

Not long ago a doctor argued to me that about three years was the limit of the money-making period for a doctor in any industrial town; during that time he would have found out most of the dead beats and served about all the good paying people, who drift away to other new comers; that people are looking for the new broom that sweeps clean, and in two or three years the doctor is left as an old story. I could not get the force of his argument, though I admitted it might be partly true. He had told me once of collecting $25 from a man to cure him of hives, when a dollar or two would have been plenty; and nearly everybody says, "If you have any dealings with Doctor Doem he will get the best of you." I have a notion that such men need to change locations about every three years, for within that time people will have found them out so well that it would be difficult for them to make a living "honestly."

However, I know men whose long and successful careers, twenty, thirty, forty and even fifty years in one place, lead me to think it depends largely upon the doctor himself, how well he wears. I have tried to do such work, and give such square deals, that I could stay in Youngstown as long as medicine claimed me as a devoted servant, or until other fields or better opportunities called me elsewhere.

When I have failed to cure, or to do work that seemed successful, people have only the best of feeling for me. There has been no trouble about the money part of the relation. They do not owe me anything. I have not sold a bargain to cure. They feel

perfectly free. My work is put on its own merit. Often I have had patients come back and say, "Well, I did not seem to be getting better, so I went to Doctor Ableman; then I went to Doctor Hornblower, and now I am back to you." Sometimes I hear how Doctors Doem, Ableman, Hornblower or somebody else succeeds where I had failed. Frequently these patients come back to me for something else, and tell me who did succeed with the former trouble. Everything is frank and above board; there is no jealousy and no hard feelings. I am glad, and so is the patient. What is the cause of these happy conditions? It is sincere work, and an honest, open, square deal as a business method. That is all there is to it, for I have no peculiar personality that charms, no occult power that wins people.

For many months during my third year, my weekly income has exceeded $200. I do not know that I can do this amount of work forever, or for any number of years. Yet I feel justified in calling it a $10,000-a-year practice. During my second year I took in almost $8,000, and if nothing happens my fourth year will equal and perhaps exceed my third. If a doctor can earn and collect $5,000 a year, and has only reasonable expense, he can live well and save something for the "rainy day." I am not expecting him to buy a new touring car every year, nor to spend half his time at pleasure resorts.

During 1911 I built a new home, and moved my office from the flat over the long bridge before mentioned to a down-town location. I have four good-

sized rooms and a large hall which serves for an overflow waiting room. One room is equipped with my electrical apparatus, a wall plate, a large induction coil, with X-ray and high frequency attachments. I have vibrators, light therapy lamps, etc. There is an examination chair, compressed air outfit, glass top stands, etc. My surgical room is equipped with a good operating table, instrument cases, more glass-top stands, a good sterilizer, and a hundred small things to fill out the list. My laboratory outfit has a good microscope, with all the modern attachments for making urine, blood, sputum, and other examinations. My small drug department has always a stock of everything I find of value, about $700 or $800 worth on hand all the time.

My drug expense runs about $100 a month, which is quite an item, but I have never yet found any right way to avoid it. For my refraction work, I depend almost entirely upon the trial case. I seldom have a case I cannot diagnose correctly with it. If too troublesome, I use a mydriatic, but usually do not need the "drops." I do not have enough refraction work to use the retinscope or ophthalmoscope. These methods do not seem practical for my purposes, as I have not had enough work to afford the necessary practice, though I use the ophthalmoscope for other diagnostic purposes.

In my reading room I have my working library, magazines, and journals. The whole place is simple, comfortable, and pleasant. The furnishings are plain and for use. I have a ten-year lease on the

whole floor of the building, and expect to occupy it for some time. Such is the situation and circumstances under which I have prepared myself to deliver the goods.

Counting diagnosis all important, as I do and as you do, I have to spend some time on new cases. Yet I cut out all the scientific frills and ostentation. I do nothing for effect. Results are what count—quick results. I employ no dilly-dally. Some doctors have to be very thorough to know anything. Thoroughness can be carried to a foolish extreme. To illustrate: Not long ago a man called on me and said, "I have been feeling bad for about three weeks. I went to see Doctor Tabman over here; six times I went to him. The first time he stripped me and made a thorough examination. In fact, I have stripped for him three times. The first time he thought I had appendicitis. The second time he feared I might be coming down with typhoid. The third time he thought I had a spot in my right lung. The next time I called he put a plaster of some sort on my arm, which he said was a test for lung trouble. The next day he took it off and there were some pimples under it, and he said I had tuberculosis. I paid him six dollars for all this, and now I have come to you."

I have never criticised another doctor to a patient. I always praise them, call them good men, excuse their mistakes and failures, and ease them down as best I can. But I am "unethical," and I make such a good target for the little hammers that knock. The

dear brothers never let an opportunity slip to throw the hooks into me!—Most of them, not all.

This man had congestion of the liver, a bowel loaded with sewage, and blood more or less full of ptomaines. Indican in the urine proved this. Ordinary clean-out and clean-up treatment for a few days put him on his feet again. I do not think he has any tubercular trouble. I can find no evidence of it. He is past forty, and shows none of the clinical signs. He paid me two dollars all told. The other man got six. My two will grow into twenty from friends the man will send; the other doctor's six will fade away while he is waiting for more.

I relate this incident to express my opinion that we may go too far with our scientific maneuvers, and also to emphasize the importance of the tactful reading of human nature. Dr. Tabman was anxious to try a new test. He tried it and by a blundering use of it lost a patient. I am trying to write about delivering the goods. I am giving you my ideas—my way. Do not imagine I think it the only right way. All roads lead to Rome. Each doctor must study out all these psychological problems for himself. Certain principles of practical application, however, apply to all. Tact is everything, talent only something, we read as school boys. A doctor with both tact and talent is a sure winner.

In a general office practice like mine, we have a great many cases of chronic character, some morbid hypochondriacs, more or less mentally abnormal. Usually one may find some real difficulty about them,

the skilful treatment of which helps; then by a use of tact, applied psycho-therapy, we can do wonders for these poor souls.

So much has been published of late about autotoxemia that I feel somewhat ashamed to add anything to the symposium. I will, however, crave pardon, and offer my humble opinion. I am satisfied that a large per cent of troublesome symptoms will disappear if the intestinal canal is cleaned out, not in the sense of purging, but clean in the physiological sense. Relieve the digestive portion from the harmful results of fermentation and putrefaction, and your patient will feel wonderful relief. Flush out the sewers of the sick, and you restore more people to godliness than in any other way.

My great success with skin troubles, neuralgias, rheumatism, neuroses and psychoses has come along this line. It is not my intention to set myself up as a teacher of medicine. I do not assume to know more about pathology, diagnosis and therapeutics than my reader. Indeed I feel quite modest. Yet I have been helpful to a number of physicians who have spent a week or two in my office, to whom I have willingly offered all my formulas, prescriptions, and methods of treatment. These visitors have come, usually, intending to use my plan of publicity, and by the arrangement I feel paid for my trouble both financially and professionally.

Since I furnish the medicines, I write no prescriptions, except for some few things that I cannot afford to dispense. I use the active principles or alka-

loids as far as possible. My drugs I buy from the Abbott Alkaloidal Co. of Chicago, the Columbus Pharmacal Co. of Columbus, Ohio, Parke, Davis & Co., and others. Many of my prescriptions I have made up in bulk, 25,000 at a time, and my granular salts, in 25 pound cans. I do not seek to buy cheap drugs. The best is none too good for my work; not how low the price but how high the quality—that is the question. Much of my medicine I have prepared for me by a local druggist, at a great saving.

There is one class of cases I have been quite successful with, that is the fat folks. I have worked out a plan that does the business, and it matters not about the kind of plethora. It works wonderfully well where there is general edema. I have also a successful treatment for alcoholics and drug cases.

My eye work has paid me very well. On my orders for glasses I make a reasonable profit and still supply them at a great saving to the people. It is wonderful how ready the profession is to take advantage of any legal opportunity to soak the public. The owners of the "kryptok" lenses charge the opticians $2.50 a pair for the rough blocks with the double lenses fused in. The optician will charge the doctor $5 to $7 a pair, according to the mountings, etc. The good ethical brothers, eye specialists, will charge the people $18 to $25 a pair for these wonderful solid bifocals, which but for the patent, should cost the people little, if any, more than ordinary double lenses.

Medicine for venereal diseases costs several times

as much as similar medicine for other troubles, because drug makers know the doctor can "soak" the man with this trouble more than for usual and respectable sickness!

I do not fall to any of these schemes. I make a reasonable profit on glasses. My fees for eye treatment and operations are very reasonable. I do not see why it is worth $2 to take a bit of emery from the cornea. I should like to do it at $6 a dozen! I have done a few cataract operations. I do not think it is worth $100 of a poor man's money.

Nose and throat work is largely treatment for ordinary catarrh. Many enlarged tonsils and adenoids are removed. Many polypi and diverted septums are operated. These operations bring in good fees, and are usually a pleasant class of cases. Suppose the man is poor and cannot afford to pay $25 for tonsil operation, is $10 not enough or even $5? What is the sense of holding all this special work at such high prices that people of small means cannot have it done?

When it comes to work on the ear our troubles begin. Chronic catarrhal deafness is incurable. I care not what claims are made for this and that treatment. Yet proper treatment will improve the hearing somewhat, prevent progress of the disease, and stop the tinnitus. I have made a long and careful study of this condition, because I am a sufferer from it myself. I have studied with and been treated by a number of the best ear men in the United States, yet I learned of no certain method. By a plan of my

own I believe I have improved upon any method I have found, either in the books or by contact with the leading aurists. By its use I have greatly improved my own case, and but for it I should long ago have been forced to abandon practice. I have restored my right ear to nearly normal, and my left is far better than it was fifteen years ago. Earlier in my story I mentioned handicaps. How does a trouble like this strike you? Yet by a method of auscultatory-percussion, I can find out lung conditions with any of them. My greatest difficulty is in the diagnosis of heart sounds.

With suppurative ear conditions we all have our troubles. Many cases that have come under my care have turned out well, and I do not dread them. I wish it were possible to mention all the means and agents I use in this field. A few days' contact with a doctor is better than a volume of written explanation.

I do not know that Youngstown is any better or worse morally than other towns of like size, yet I have always from fifty to one hundred cases of gonorrhea, and twenty-five to fifty cases of syphilis and chancroid on my hands. My experience with thousands of venereal cases should teach me something, and I think it has. My success is so well established that "men about town" always send these cases to me. I do not take advantage of them, as is the custom. I sell no bargains to cure. My methods are simple and effective.

I have never used "606" or any of the get-rich-

cure-quick things of recent origin. I do not like the grafty look of these preparations. If these are good things, why not give them to us the same as we have anti-toxins and other valuable agents?

Every successful office practitioner must handle cases of stricture, prostatic trouble, and all the attendant conditions. We have good and effective treatment, both medical and surgical, for all these troubles. A large part of my income comes from office surgery. I have done no abdominal operations in Youngstown, for want of hospital connections, which connection for obvious reasons I have not sought. Some few cases of herniotomy, mastoid operations, and some gynecological work, I have done at the homes. Many things that other men insist upon doing at hospitals, I do in my office. With circumcisions, hydrocele, cystocele, varicocele, surface tumors, small amputations, etc., I have no trouble. I also do all my rectal work in my office. I have done two herniotomies and had the patients taken home in cabs, but I prefer to have such cases avoid the risk of harm from removal.

My surgical fees are always agreed upon before the work is done, and almost always paid cash. I have lost but one fee of ten dollars in the past three years. I have no trouble, no complaints, no disputes. The work always pleases better when it is paid for. It is wonderful how bad the effect of an unpaid bill is upon an operative case.

I use local anesthesia almost entirely. The quinine and urea hydrochloride anesthetic is the

greatest discovery of recent years as an aid to minor surgery, especially for incisions you do not wish to close.

You will note that I report no work along the line of blood transfusion and transmission—no Carrel operations. I appreciate all this work, and have nothing but praise for the great things the Rockefeller Institute and other research workers are doing. I have no time to study the opsonic index. I must get quick action and speedy results. I am running a street car and not a taxicab. I am making an honest living from the practice of medicine. I am not seeking a professional immortality. This is why my story will not interest the ultra-scientific brothers. I realize that to them this chapter will seem as idle prattle; but to those who are interested to know how I have won a $10,000-a-year practice in office work, this prattle may seem pertinent.

Much of my work is for women and children. When I was not so busy, I did some obstetrical work, but for a year or more I have turned it over to those who needed it more than I did, and I asked no commission either. I consider gonorrhea and its complications the greatest study that a doctor can make in behalf of women. Nearly all of their pelvic complaints come from this infection. Thinking out plans to help these unfortunates has kept me awake nights more than any other human ailment.

It falls to my lot to nurse along many of these physical wrecks from gonorrhea, for whom some

surgeon has put on the finishing touches by the removal of ovaries or uterus.

I am frequently called upon, as is every doctor, to do abortion cases. If I were an "ethical" doctor and had my present surgical ability I should be tempted to relieve some of these unfortunates. I quite agree with Doctor Robinson wherein he advocates the idea of better quality in offspring instead of numbers. I firmly believe many children are born that should not come into the world. Many cases of legitimate and illegitimate pregnancies would be relieved if I had my way about it. But things are as they are, and the law reads as it reads, so that poor over-worked and underfed wife of a drunken husband, mother of six small youngsters, must go on and give birth to another puny, frail, ill-begotten, unwelcome child,—I cannot relieve her. The young girl of good family must bear her shame and disgrace because she trusted some dishonorable fellow, who wafted the sweet words of love into her ear—I cannot help her out. Other doctors can, and do it for a liberal fee. I am "unethical," and cannot do it. Some of the "ethical" doctors cannot do it either, but every town has plenty of good men in good standing who do it regularly, and both the public and the profession seem to expect and demand it of them. But let some unpopular and unethical brother get into any trouble along this line, and these very men are the ones who bark the loudest at his heels.

How well I remember Lizzie. She was a plump, flaxen-haired lass of eighteen summers—winters

don't count, the parks are closed. Her sweetheart worked in the sheet and tube mill, and they expected to get married some day. The day she appeared at my office, her eyes were red from crying, and with many tears and sobs she told me her story. It was the same that doctors have heard a thousand times for as many years.

"Where is John?"

"I don't know. He left town and I haven't heard from him for three weeks."

"Does your mother know?"

"No."

"Go right home and tell her."

"Oh, I can't go home. I can't tell her. She'll kill me!"

"No she won't. You tell her or I will."

"I'll jump in the river first. I'll never go home. I can't go home."

And not a step would she budge. How pleasant it is to get these cases. I telephoned to the mother and she came on the jump. Mother did not kill her erring girl; mother was a woman and she knew a woman's trials. She got busy and found John. There was a wedding up at their house, and later a "six months" baby arrived. I see the young mother frequently pushing it by in the go-cart. But I lost a case. I did not even collect my fifty cents; I was so glad to get rid of her that I forgot it.

Many of these cases that I have turned away seem to find help somewhere. Sometimes they tell me afterwards the names of doctors who helped them out.

Often these are names of men active in the local society, and strictly "ethical." I am therefore forced to the opinion that the laws on this subject are largely dead letters, and that both the public and the profession demand a certain limitation of offspring. I do not claim any special difference of opinion on the subject, but I leave the discussion to more able minds. One thing is certain, I do not intend to satisfy some of my professional well-wishers who hope to see me play the part of the calf that was given enough rope to hang himself. It is also certain that it is a contemptible spirit when such laws are used to prosecute some who happen to be unpopular and out of goose-step, while the same conduct is entirely ignored when employed by those who wear the togas of power.

I have now touched upon the several kinds of work I do, and don't do. It is thus I deliver the goods. I attend strictly to business, seven days in the week. I greet my patients cheerfully, and we have many smiles together, and yet I do not hesitate to come down hard when occasion demands.

I do all sorts of work for all sorts of people, from head to foot, and do it the best I know how. It covers all those little mean unscientific things spoken of by the good Doctor Holmes, from a wen or a wart to an ingrowing toenail; all these things receive my best attention. Those who wear silks and diamonds get the same treatment as those with the horny hands of toil; they are all just human beings needing help.

I am the People's doctor.

"Nothing will ever be attempted if all possible objections must first be overcome." — *Dr. Saml. Johnson*

The average man has to sprint occasionally in order to keep up with his running expenses.

CHAPTER VIII.

DR. HOPEFUL'S PLAN ANALYZED ETHICALLY.

I HAVE now outlined for you what I have accomplished, and how. I do not know that I can hold my practice at $200 a week, yet I am sure that sum might be fixed as a reasonable average. Every week brings its sprinkling of surgical fees, and a grist of new patients along with the old ones. I do not care to be over-worked. If I should advertise every day or every other day, instead of twice a week, with often several weeks of silence, as of late, I should have to employ an assistant or two. This I have not cared to do. I am selling a personal service, and it cannot be commercialized as easily as a dentist's work. There is, too, a limit to every man's working capacity, and unless he does good work, makes careful diagnoses,—and let me repeat again diagnosis is everything—he does not get results, and does not deliver the goods. I do not want to be too busy. I want time for reading, for the study of cases; I want to grow professionally. I also want time for the enjoyment of my home. All work and no play is not living. Putting off till tomorrow the enjoyment of life that is your due today is a crime.

It is the purpose of this chapter to discuss the ethical aspects of my plan. Strenuous objections

will be raised and have been raised to my position on the subject of open advertising. If I succeed in presenting my position fairly I may save my reader from making a snapshot judgment.

I am not saying that you in your small corner may do just as I have done in mine. Doctors differ and towns differ. However, the principles of honest publicity apply to all doctors in all places. Every doctor must have publicity, must become known. He depends upon the people for a living; therefore he must advertise himself in some way. The usual and customary way—that recognized as ethical—is to display one or more well lettered signs of modest size, list your name in the city and other directories, and in case you are one of the lucky ones who have a hospital position, this may be indicated in the reports and publications of the institution. If connected with a medical college, this position is advertised in the catalogues and college annuals, or other publications of the institution. The branch taught is called a specialty, which enables you to attract business from the alumni and doctors generally, as an expert in your particular line. Reprints are mailed broadcast by active men, the ostensible object being to spread useful information among the profession, but the real object being to impress the family doctor with the skill and success of the sender, the number of his cases, and his great professional importance, in order to stimulate the reader to call on him when in need of his skill.

Of course it would be very wrong to appeal to the

general public directly, but doing so indirectly through the local doctor is right, ethical, and commendable. Morals and medical ethics have some queer differences. In civil law it is just as bad to engage an agent to commit a crime as it is to do the act itself. Both principal and agent are guilty. Medical ethics, however, says you may secure business from the public through another physician, but it is a crime if you appeal to the people themselves.

Dr. Chas. F. Bowen, of Columbus, Ohio, has become very skilful in the removal of foreign bodies from the esophagus and bronchus by the use of the X-ray and fluoroscope to guide the forceps in grasping and removing the offending object. Dr. Bowen must keep this skill secret from the people. He may tell other doctors and they may convey the information to those who need it. A child might die with a button in the bronchus, because the parents did not know Dr. Bowen could save him. Of course the doctor may convey this information verbally, but if the same story is printed for public reading the doctor has committed an ethical crime.

This peculiar attitude of ethics may be justified by the argument that it is unsafe to let down the bars; that unscrupulous men would abuse the privilege, and great discredit would be thrown upon the profession at large. Also, it may be said, that in order to talk intelligently and truthfully about medical subjects, a terminology is required that laymen do not understand; that the dignity and secrecy of

medical things must not be exposed to the public. Why? I dare my critics to answer that little word.

Dr. Woods Hutchinson has written much on medical affairs for the popular magazines and periodicals. He has used language that people understood. It is generally admitted that his writings have been helpful and served a good purpose—not always helpful to doctors, perhaps, but helpful to laymen. I do not know if Doctor Hutchinson is engaged in practice, but I am sure he would have a good one if he opened an office in any American city of size, because he has widely advertised himself. He has allowed many people to know his personality by reading his writings. That is exactly what I have done in my small way. I have taught people to know me, to have trust in my word, and confidence in my ability, by the publication of my newspaper stories.

Now all doctors cannot do what Doctor Bowen does; neither can all doctors write as well as Doctor Hutchinson. Under freedom every doctor would find his level. If he wrote well, but did not succeed in his work, it would not pay him to advertise himself in order to sell his work—he had better sell his writings. Publicity freedom would enable the people to select the doctor they thought best suited to their cases. It could not harm the profession as much as the present system, for the people now use very little intelligence in selecting their doctor. The present system is a game of bluff, and usually the biggest fourflusher gets the best practice.

If the use of printing and advertising were abus-

ed generally as it is now incidentally by doctors termed "advertising quacks," the people would demand and get laws that would protect them, just as we demanded laws against lotteries and other frauds; and dishonest users of advertising would find it a grave concern to deceive the public through such an agency. It would not be difficult to extend the law regarding the misuse of the mails to cover the misuse of advertising. This is the next step in the conservation of the people's rights.

Dishonest advertising would not pay the doctor any more than it pays the merchant. Both must deliver the goods and give the people a square deal. The ban that ethics places upon advertising, works about as successfully as prohibition on the liquor traffic. This ban forces the profession to use the many contemptible secret schemes to get business, all of which you know more or less about. Like the use of liquor, advertising is a personal question. If doctors used advertising as some do now, in such a way that it caused harm, financial or otherwise, there should be laws to regulate it, just as we have laws to regulate other things, saloons for example.

If ethics permitted, not all doctors would need or care to advertise. Formerly ethics allowed and still allows the doctor, I believe, to insert his card in the public print. What I contend for, is that he be allowed to print anything he pleases so long as he shows on the face of it his honest and upright intention. Let him display his personality in print the same as he does now verbally. If he departs

from professional sincerity and business honesty, it should cause him to come to grief just as quickly as it does now if he publishes obscenity or perpetrates a fraud. In short, I demand for the doctor the same business freedom as that enjoyed by the banker or merchant.

It may be said that I show no high conception of medicine as a profession; that I seek to degrade it into a mere fee-getting traffic. My answer is, that my conception of medicine as a profession is more dignified and is made cleaner by demanding for it all those things that we attribute to upright modern business. By the present system it has degraded itself into a disgraceful scramble for fees, and made its "code" the laughing stock of the intelligent world. It is high time doctors shed the traditional atmosphere of the medieval cleric and take their places among scientific business men. Our dental brothers are farther along than we are; yet in order to seem like us, they too have some ethical sentiments about advertising.

I do not suppose, as I have said, that all doctors would need or care to advertise at all times. Advertising would serve its good purpose in the beginning of careers, upon change of location, or to announce special things. If the skilful ad-writer attracted many people and did not serve them skilfully and fairly, his efforts would be of no permanent avail. The liberty would regulate itself.

The second objection I deny in toto, except that if medicine wants to hold to itself for its own ad-

vantage a mysterious secrecy, an assumed dignity, etc., in order to impress the layman, then I charge insincerity and selfish design—just the same charges that have been made against the clerical profession for centuries. We prate about the unselfish nature of the medical profession, its self-denial, and self-sacrifice, etc. If all that stands between us and ruin, —financial disaster,—is our dignity, ponderous nomenclature, mysterious secrecy, and professional piety, then are we skating on thin ice.

Again it may be argued that advertising to the public would add to the cost of the service, and work additional hardship on the people and on doctors who did not know how or care to employ this agency. It is granted that it would present an amusing spectacle if all doctors advertised as I do. It does not pay all business men to advertise, and it would not pay all doctors. However, those who, by reason of good advertising and skilful service, did make it pay, could attract a greater volume of business, and if the fees were paid cash, they could afford to serve people for less than those who did a credit business and did not advertise.

Now as to its harming the weak brother, we must state some cold, hard facts. I truly wish the world were one of universal brotherhood. I wish all men in business succeeded. I wish all mankind were well-fed and clothed. I wish all had good homes and uplifting amusements. I wish there were no struggle for existence, no "survival of the fittest," no crushing of the weak, no exploitation of the

ignorant. I wish every doctor had an income of $5,000 or $10,000 a year. Yet things are not as we wish. Things are as they are. The well trained and competent men, with business-getting faculties, with attractive and dominating personalities, with confidence-inspiring manners, are the ones who succeed today. The stronger the combination of all these faculties, the greater the success. No ethical code or professional law can hinder such a man from walking over and upon the heads of his fellow craftsmen to success. You have seen this done repeatedly, and so have I. We see it proved every day that, just as goodness and piety have nothing in common, so ethics and honesty are not synonyms. As I have said elsewhere, ethics has failed completely in making a bad man into a good doctor, or a trickster into a soul of honor. Even Hippocrates knew how this would be!

I maintain that honest advertising is ethical and should be so recognized, and that when state boards go so far as to make an applicant file a written promise not to advertise, they assume the position of an arrogant bureaucracy. I claim that the doctor should have the same liberty to print as he now has to speak. I hold that since life and especially professional life is a relentless struggle, we only make a bad matter worse by trying to curb it, thus opening the way to secret schemes and private grafts.

I go so far as to say that ethics fails when it does not demand legal power to regulate a doctor's business methods. I charge the present system with

fostering hypocrisy and insincerity; it does not give the honest man a fair chance. If the state of Kansas is to be commended, as it surely is, for the new laws it has enacted to exclude from that state the selling of questionable stock schemes; if honest newspapers and magazines are justified in refusing all sorts of advertising that might lead to harm for the readers; if the United States is justified in regulating Big Business,—then the organized profession is justified in regulating a doctor's business methods, and in a more practical way than condemning honest advertising.

While speaking of medical advertising I may digress a moment to quote from an editorial in a recent number of **Everybody's** that is quite worth recording:

ADVERTISEMENTS WE DECLINE—AND WHY

We decline cigarette advertising, because we do not care even remotely to help any boy acquire the insidious habit which undermines his health and his morals.

Whiskey and liquors generally we decline, because we never had any respect for the saloon business, and do not care to be a party to it; especially do we not care to bring the bar into the home.

Malt is hard to classify. It is a liquor and a food and a medicine—a tonic. It is accepted by magazines quite generally. Do you think it should be declined?

We decline patent medicines, especially those that are designed to be used internally.

Grown men and women ought to know enough not to take anything harmful.

But—

Rules for a well man are not rules for a sick man.

A sick man is in no condition to prescribe anything for anybody, least of all, himself.

We haven't the slightest doubt that thousands of people are kept ill by the constant use of patent medicines.

Thousands are made ill by reading the literature.

A sick man ought never to diagnose his own ailment, prescribe for himself, or permit a patent-medicine advertisement to prescribe for him.

We believe that a sick man ought to consult a physician from whom he can learn what's the matter with him and what's the best remedy.

Physicians are prescribing more than medicine nowadays. They give just as little medicine as they must, and stop it at the first possible moment.

We have no slightest doubt that a good physician is the cheapest and best investment for a sick man.

Holding these views, how could we run patent-medicine advertising in our pages? Making it easier for sick people to do exactly what, we believe, they should not do.

We have no quarrel with patent medicines. Many of them are meritorious. Many can be used to great advantage and profit under the physician's advice.

But—until some firm of patent-medicine makers comes along which recognizes these dangers we have pointed out, and avoids them in its advertising, and makes its appeal to the physician instead of the public, we shall not be likely to change our policy.

It is horrible to think of the millions of dupes searching so eagerly for health, the prey of the conscienceless advertisements of the conscienceless patent-medicine men.

Is that "holier than thou"? Is it not rather the horror all right-hearted people must feel toward men who prey on the illness and weakness of their fellow men?

Some of the magazines are proving that they can live and prosper without running such business. Some of the newspapers also are declining it and thriving.

We cherish the hope that gradually all magazines and newspapers will find a way to live without carrying any business that might harm any readers in morals, health, or pocketbook.

In another place I shall try to outline an ideal medical practice system, but no such thing can exist under the present competitive individualistic order

of society. We have by the force of facts to make the best of what is. We are up against conditions, not theories. Evolution is gradually socializing the doctor. I mean by that, the profession is gradually becoming a public function—is becoming governmentalized. The army and navy medical officers, the public health officials, the city and district physicians, by and by a properly organized National Health Department, all these and more are but the first steps of the process. All these make it harder for the rank and file of doctors to make a living. When the health officer cleans up the town, purifies the water supply, checks the epidemics, etc., he is taking the bread and butter out of the doctor's mouth.

When we get our National Health Department we must be careful lest it fulfill the prophecy of U. S. Senator Works, who said in a recent speech (First Regiment Armory, Chicago, Ill., Nov. 24th, '11:)

"The establishment of a National Bureau of Health as proposed by the American Medical Association is afoot to 'freeze out' every physician and surgeon who refuses to bow to the will of the American Medical Association. It will mean the abrogation of our constitutional right, and we propose to fight it to the end."

If a National Health Department is to add only power to the present tendency toward medical plutocracy and official oligarchy, then we do not want it. We want what is best for the whole people, not what

is best for doctors, or best for A. M. A. members, or the members of any other medical body.

The fact that Senator Works is a devotee of Christian Science, may have something to do with his position.

The whole system of medical government is so absurd to the thoughtful layman that he laughs at it. It is so insincere to the intelligent doctor that he ignores it as far as he dares. It is so hypocritical and tyrannical that it has flayed many of us into contempt, especially those of us who have had nerve to get out of "goose step."

The organized profession is not a trades union. It is not employed by one or a few employers, *en mass* The individual doctor sells his labor as he sees fit to individual and temporary buyers. He does not and can not keep faith with any established schedule of fees. He must and does sell his work by the get-what-you-can system. He collects his bills if possible, but for about half his charges he whistles!

If, then, the organized profession fails ethically and financially to regulate its industrial life, what has it to boast about? The trades union does not fail thus completely. I contend, therefore, that the doctor has the same right to announce his business in any honest and clean manner as the banker, the merchant, or any other business man. I do not claim that every doctor would find it best to use newspaper advertising. It might help the present system of the social world, which doctors seem to like so

well, in weeding out the weak and rewarding the strong.

I do not admit that a properly and scientifically organized system of society would need advertising at all. Indeed, it is one of the many wastes of the competitive system. But since medicine is so rampant a devotee of the individualism now in vogue, it should not refuse to swallow a little more of its own medicine, in the form of ethical freedom to use open and honest business-getting advertising devices. In short we should cease straining at gnats while we swallow camels. We should cease deserving the contempt of the world by hypocritical, hair-splitting professional bickerings. We are as absurd as those bodies of clerical gentlemen who meet annually and metaphorically pull each other's hair and claw at each other's vitals over creeds and confessions of faith.

But doctors are about as human as other folks, if not more so.

The question to-day is
not "what do you know?"
but, "what can you do?"

CHAPTER IX.

HONEST AND DISHONEST ADVERTISING.

ADVERTISING is a science, but not an exact science. It is probably as nearly so as therapeutics, but it cannot be reduced to a mathematical certainty. Millions, many millions, of dollars are spent each year by all classes of business men, trying to utilize it profitably. This expense added to the natural cost of goods, represents a great burden that the public has to bear, in addition to many other burdens. The only recompense the public seems to get in return is a cheaper subscription rate for magazines and newspapers. As elsewhere stated, it is one of the costs of competition. The present profit-seeking system is the most wasteful and expensive that human ignorance could invent.

The department store bargain counter is thronged by ladies who respond to bargain advertisements, but they do not see the life blood of the city poor that drips from the garments they seek so eagerly to buy for less than they are worth. They do not see the miserable sweatshops, the worn fingers, the hungry children, and the woes that poverty brings to the poor of the underworld. Profit-seeking under competition is a lash that drives; Poverty is the cruel driver that wields this lash over the worn backs of the wage-slaves of the world. Still in their de-

lusion the statesmen and even the voters cry out for more competition, because it is "the life of trade."

It is not my purpose to discuss the economic side of competition. That is a separate story. I now beg indulgence to analyze a little what I have called Honest and Dishonest Advertising.

When a merchant advertises bargains he must be honest. He must have a sufficient quantity and assortment to satisfy a reasonable demand. Unless he really has a bargain, he pays the penalty for deception by losing the public confidence, and his store soon gains a bad reputation. Since he must depend upon repeated business from the same patronage, he is forced to stand upon the principle: "Goods are not sold until the customer is pleased and satisfied." So with honest advertising, a one-price-in-plain-figures, money back if not satisfied, business in the last few decades has taken on a new life, and along with it a new degree of respectability.

One of the strongest objections that has ever been raised against a doctor's advertising, has been that he could not advertise honestly. All he could honestly say would be, "Dr. John Doe, Physician and Surgeon," and give address, hours, etc. He could not even say, "I am a good doctor—come to me." If this is true, then the practice of medicine is not an honest business. If medicine is not an honest business, then it is not a worthy profession. However all this may turn out as an argument, it has seemed so precarious a thing, that long experience has taught the profession that the safest side to take

is to keep out of public print, lie low and keep mum.

At first thought one would have to admit the wisdom of all this, but a more careful study of publicity and present business and economic conditions will show that a doctor can advertise his work honestly in more ways than the display of his business card. He is a public man, and as such he may call public attention to himself in one of a dozen business-getting, and praise-worthy ways. All of his methods of publicity must be adapted to the town in which he lives. His advertising efforts must also be adapted to himself.

For example, suppose this doctor we have in mind lives in a town where there is no sewerage system, or even where parts of the town are not yet reached by such a system. Let this doctor take up a dozen matters of public health interest. Suppose he prepares an illustrated explanation of the cesspool system of sewerage disposal and mails it or delivers it to all householders who should dispose of outdoor closets. This is only one of many things that come into line with a doctor's work and life, and if he shows himself active and alive he will gain in public approval, because he does all this in a positive way, without officiousness, or conceit, or offensiveness. It matters not where he lives, this live-wire doctor will find profitable use for printer's ink.

The use of newspaper advertising is a matter of circumstances, depending on the size of the town, and its industrial character. I am not advocating the use of newspaper advertising merely; I am talk-

ing about advertising in general. I contend for the freedom of every doctor to seek business openly and honestly so long as he shows good faith and good intent, instead of the present sneaking about to get old woman agents, free write-ups, and chances to sing in the church choir.

The writer has long condemned the methods of the usual advertising doctor, the so called "advertising quack," and did so just as vigorously as his most punctilious ethical brother. This word "quack" has been a handy epithet for doctors to throw at each other, but it has often proved to be a boomerang that came back and cracked the head of the slinger.

I have called some of the contract-to-cure advertising doctors medical pirates, and they are, as a rule. They locate in towns of sufficient size to insure a goodly number of victims, and when it is fished out they move along to a new field. They are looking for "suckers," and they find them. They expect and want but one crack at them. They are not seeking a permanent clientele; they are seeking one thing only—money. Allow me to quote a sample advertisement, and analyze it for you. You have read many of these advertisements. They are all about alike, and you might understand the game better than I do, but my trying will do no harm:

BLOOD POISON

We specialize the diseases named below. Our treatment is painless; we do not cut, and you can go right along about your daily business as usual.

We master most Stomach, Pelvic and Special Diseases. Prostatic Troubles, Kidney, Bladder and Skin Diseases and Nervous Debility. Blood poison treated by the latest method.

SWELLINGS

almost any kind can be cured without cutting.

DISEASES OF MEN seldom fail to yield to proper treatment without the use of instruments.

RUPTURE

treatments without cutting or interruption to your daily duties.

SKIN TROUBLE

Itching, Roughness or Rash.

BLOOD AND MERCURY POISON.

Rash, Ulcers, Sore Mouth or Throat, Swollen Glands, Mucuous Patches, Copper-colored Spots, Rheumatic Pains, Eczema, Itching, Burning, Nervousness.

CURED TO STAY CURED.

Men don't worry over your condition or hesitate. Quick action may mean a quick cure at my hands, and the low cost will surprise you. **Consultation free. If you cannot call now, write.**

No EXTRA CHARGE FOR MEDICINE.

DR. STICKEM : Youngstown, Ohio

Specialists for Men and Women. Consultation Free.

Where Thousands have been Cured Is the Safe Place for you to go.

Office Hours: 9 to 12, 1 to 5 and 7 to 8. Sundays 9 to 1.

You will notice the title, "Blood poison." This is used because it means many things and always serious things to the uneducated layman. People are seeking to buy "cures." You will notice how much the word is used, with the emphasis placed upon, "cured to stay cured." See how neatly the hook is baited with "low cost" and "consultation free." These men are all "specialists," which cue the grafters have taken from the ethical brethren, and it is used because the people have been taught to respect the special doctor, pay him a larger fee, and more promptly than the family physician.

Some of these grafters say, "I will not take a case I cannot cure," yet they never refuse a case of any

kind. Simple and imaginary ills are magnified and wonderfully cured, when the fee is paid. When charged with these things the advertising doctor of this sort, says, "Oh, yes, this may all be more or less true, but it is just as true among doctors who do not advertise. We could not teach the ethical fellows anything." I have often wondered what reply some of the ethical cloak wearers would make to this.

Not long ago I had a case of tonsilitis. A girl of seventeen had washed her hair and stood out in the wind to dry it. She came to me and I gave her the usual treatment and medicine. The next day a lady friend urged her to go and see Doctor Stickem, for she feared it was something serious. "The doctor is a specialist, and does not charge you anything for an examination," the good friend assured the girl; so they went together to see "Specialist" Stickem. The examination was made, and with a serious face, and much shaking of the head, he announced to her friend, "This girl has a bad case of syphilis. She will be dead inside of a year, unless she has proper treatment."

The scared child rushed home and told her father the doctor wanted him to come to his office at once. The frightened father went post haste. From Doctor Stickem's office he came directly to mine. Here is the dialogue as near as I can recall it:

"I am Mary Manley's father. You were treating her throat."

"Yes, how is she?"

"I don't know. I just came from Doctor Stick-

em's office, and he says she has a bad disease. He says she will die if not treated, and he wants fifty dollars to cure her. Now I want to know if it is so. I've got two younger girls, and if she's got this trouble she's been bad, and I won't have her at home."

The anxious father paced back and forth, striking his fist into his palm. While I was finding my case card he added: "I was just expecting this sort of thing when she went to work up at that restaurant."

"I do not think Mary has any such disease. All I can see to it is a case of acute tonsilitis, and I fear the doctor is either mistaken or deceiving you to get the money," I said.

"Well, I ain't got the money and he did not get it, but if Mary's bad I want to know it."

"Now, listen. It will do no harm to wait a few days. Have her take the medicine I gave her just as I directed, and if she is not better by the time it is used up, have her come back and we will investigate further. I don't think she has done anything wrong. You had better say nothing about that until we know for sure."

Three weeks passed and I heard nothing more of Mary. Then one day the mother came in for something for herself.

"How is Mary?" I asked.

"Oh, she's all right. She got well in about a week. Say, do you know that Doctor Stickem would

have got fifty dollars out of my old man if he'd had it?"

This is but one of a thousand stories you and I could tell to illustrate how degraded is the work of the usual advertising doctor. What is the remedy? Is it to draw the lines closer and press down the ban harder on advertising? Is it to secure such laws as would make men forfeit their licenses for dishonest dealing? Is it to make newspapers responsible for the loss the reader sustains from dishonest advertising appearing in its columns?

As it is now, most reputable newspapers will not publish advertising that does not show honest intent on the face of it. Is there any way that the organized profession, or any other authority, can regulate the business methods of doctors, no matter whether they advertise or not? Surely these are suggestive questions.

I am now going to quote two of my own advertisements and analyze them a little for you. If my argument is not sound, I shall be glad to be shown the error of my ways, for no doctor on earth has greater desire than I to see medicine a strictly honest and upright business, holding as such the fullest public confidence. Has the public confidence been sacrificed? If so, who is to blame for this loss? Why do people listen to the advice of the druggist with more respect than they do to the advice of the doctor? What is wrong with the system, that people buy such an enormous quantity of patent medicine every year?

Here are two of my "stories:"

My Regular Notice.

I do all kinds of office work the best I know how. That this work is good thousands of my patients will testify.

I make a special study of the eye, fitting of glasses, ear, nose, and throat, and the removal of foreign bodies in the eye. On glasses I can save you about half the usual price.

I have many patients for trouble of the skin, veneral diseases, nerve disorders, etc.

I use medicine, electricty, massage, vibration, light surgery, and all modern rational methods of treatment.

The regular fee is 50 cents, paid cash, medicine included. A treatment card can be bought for 12 treatments, price $5.00. Surgical fees according to the case, but always agreed upon before the work is done.

I make no contracts to cure, nor treatment by the month. My work is put on its own merit, and if a patient is not pleased he does not have to come back. It is the open-and-above-board, square-deal plan for office practice.

If you need my help I am at your service.

DR. BLANCHARD

3 West Federal, Central Square, 3rd Floor, Chelekis Corner.

Hours: 9 to 12 a. m.; 1:30 to 8 p. m. Sundays 1 to 4 p. m.

ARE THERE TOO MANY DOCTORS?

I had a doctor caller today, and he said, among other things "Fifty physicians could do all the legitimate work that is needed in this city."

I thought that was a little strong, yet I admitted the work is overcrowded. What interested me is, who will volunteer first to quit?

Reading today Pearson's magazine article, "The Farce of Medical Ethics," I wondered how the local brothers of the Guild would like it.

Medicine, like any other business, is a great struggle. The fittest survive; good men sometimes fail. I have threshed out this thing for you in all my stories during three years. I am mighty sorry for the hard-working family doctor. The whole system is wrong, and since I cannot make it right, I am doing

the best I can for myself, giving the people the square deal, fighting fake-schemers who are selling cures by contract and all that.

My plan of honest advertising continues to gain new friends, and the many old ones I have made by doing the best work I know how, stick to me.

I am reasonably busy doing all kinds of office work for a modest fee, and collect it cash. If you need my help, I am waiting to serve you.

My usual charge is 50 cents paid cash, medicine included. If an operation is needed, the price is always agreed upon before the work is done. I am at your service!

DR. BLANCHARD

3 W. Federal St., 3rd floor Chelekis Corner, Central Square.
Hours: 9 a. m. to 8 p. m. Sundays 1 to 4 p. m.

You will notice that I agree to do the best I know how, and that for this effort I expect to be paid a fee. It is a simple statement of the work I do, the price I charge, and my address. It is an honest bid for business. I have often varied my stories to make them interesting and readable. There are many who come to me saying, "I have read every one of your advertisements for three years."

I have publicly fought the dishonest advertisers, and Youngstown is not as good a field for them as it used to be. Several have left for want of business.

It may be argued that few doctors have the knack of writing attractive advertisements, and only the exceptional one would succeed by using newspapers. This may be true, yet each should be free to try in any honest way he can to improve his condition. I am not telling this story to sell newspaper space. I am trying to send a message that will help men in

medical practice to assert themselves and demand ethical liberty to do things for their best interests.

It may be argued that successful advertising such as mine gains more than my share of the work, and harms other doctors, who do not feel free to use like agencies. If this is true, I am sorry. Yet the same charge can be made against the whole system of the organized profession. Does the hospital staff think of outsiders? Does one ethical doctor think of another's financial welfare? No one regrets this disgraceful scramble more than I do. The good brothers have walked over me, and tramped me in the mud and cared not. Is it not a fight, every fellow for himself?

Not long ago a doctor came to me and said, "Doctor, I am not making expenses. What had I better do?" Did the profession care about this man's condition? Not one whit. He had always been ethical, and had tried the best he could to make a success of his work. He came to me because he had read my advertising and wondered if he could not do something like it.

It is up to me and it is up to you to survive this system in the best way we can. For me, I had to choose between ethics and honesty, and I let ethics go. Not that ethical men are not honest—many are; many are not. What I mean is that applied ethics and honesty have not necessarily anything in common. It is a beautiful, impractical theory.

We cannot change things as they are, but we can manage to adjust ourselves to them. My way of

solving this problem of adjustment, I am telling you. Your way may not be the same. By some means you must get there, or you will be tramped in the mud by the world.

It is futile, as I have said, to dream of things as they should be, when the hard facts of life demand our most skillful attention. Yet sometimes, after many years, some dreams come true. I am for this reason presuming enough to try to outline a system of medical practice as it should be and will be some day. Not just as I put it, perhaps, but along this line.

Ignoring competition and being hypnotized by your own skill is a sure forerunner of a rude awakening.

It is said that "experience is the best teacher." The course will be a mighty expensive one unless you appropriate what others may have learned.

CHAPTER X.

A WORD ABOUT FEES.

IT IS now proper that I should say a word about fees. I have heard a good deal of criticism because I put my fee so low. I have never attempted to say what was right for a regular office fee, paid cash. While my usual fee has been fifty cents, I have tried to protect myself against imposition. It is true of some people that the more you do for them the more they expect of you. When I have treated two unrelated ailments, I have charged and collected two fees. If my patient could not come as often as usual for such a case, and asked for a double supply of medicine, I collected two fees. If a patient required a long and careful examination, that is, an investigation demanding considerable time, I have charged one dollar.

For surgical work I have usually received about the usual schedule fee, but varied often when the patient was poor. I have always insisted on a cash fee, unless it was an emergency case, and then we had a definite understanding. The work always pleases better, and seems to be more successful, and the whole relation more agreeable, when the surgical fee is paid. In fact, the cash plan helps very much to make my work pleasant. No one owes me anything,

and I am greeted by thousands in the kindest manner.

I have had but one exception to this rule, and it illustrates a point so well that I will venture to relate it. A returned soldier from the U. S. Army in the Philippines fell into an excavation one evening and fractured the upper end of the radius. It was an emergency case, and he had no money with him; but we agreed upon a modest fee of ten dollars for the whole job. He would pay me the next time he came for a dressing. At the next call he thought he could get some damages from a liability company, and if so he should pay me $25, ten dollars was not enough, he said.

After considerable negotiation with the ex-soldier's lawyers, the liability company paid him $175.00, after getting a report from me, but for which the man would not have been paid a cent. The money was paid over to the lawyer, who called me up saying a settlement was being made, and I had better get in on it. I asked the lawyer to send the man to my office. This message aroused the fellow's ire, they said, and he opined that I seemed "damned afraid I would not get my money." I was a bit suspicious of this fact myself, and am yet. He took a trip with the money, and came back broke. Now as I meet him, he passes over to the other side, or is very busy looking the other way! Once I stopped him, and the only satisfaction I could get was that he would pay it as soon as he could. He is sore and ugly, not because it was not a good and satisfactory job, but be-

cause he owes me. I feel sure I might better have made him a present of fifty dollars, or at least a receipted bill.

I do not attempt to say what is the right fee to charge. Fifty cents in many cases is not enough. A dollar fee would be none too much for some locations and sections. The honest advertising doctor must settle that for himself. It stands to reason, however, he can charge less for cash than for a credit business. I am not claiming fifty cents as the right fee. It seemed best for this location, yet I might have succeeded about as well at $1.00 fee.

During my first year in Youngstown, I did some calling practice until my office work forced me to give it up. I feel sure good business principles may be applied to this, as well as to office work. I should use the same card system that I now use, and carry my cards for each calling list for the day. These show the whole story, clinical and business record, posted in full at the bedside. I would have it generally understood that I was a cash doctor. If it was a case demanding but one call, out would come my card, and before leaving I would have my money or a promise as to when it would be paid. I would make as few calls as possible, not as many as possible, and when I came to the last call, or nearly the last, I would say, "I shall have to come but once more, if everything goes well. That will make so many calls, and the bill will be so much. If you can, please have the money ready for me then."

If I did not get all, I should get some, and a

prompt settlement of the balance. I consider it a dangerous thing to allow patients to owe me. It will often send them to another doctor. Those who have paid their bills are usually well pleased, and as a rule stick to you. Plenty of my patients owe other doctors, but they come to me and pay cash cheerfully, and send me their friends; yet I do not claim that my work is any better than that of others. But my work is paid for, and this has a wonderfully satisfying influence.

It would not be beneath my dignity to call and inquire why promises to pay had not been kept. I should often get all or part and a new promise. I would be agreeable and pleasant, but by and by it would sink into the public mind that Doctor Blanchard has to be paid; he always wants his money, but he is a good doctor and earns it. Good things in this world cost money. It is cheaper to pay him in full than some other doctors half.

In short, I would teach people to understand that my work was important and vital, and that people who did not intend to pay me need not call on me. Of course, these principles are the same in any community, though it may be necessary to apply them differently.

In my office practice, not one in a hundred comes to me without the fee in hand. The doctor can teach his patronage this cash rule just as easily as a street car or a railroad. No one gets aboard without the fare. Such a policy does not sacrifice professional dignity, and it enhances public respect.

A tactful use of discounts may be employed where ability to pay is weak, but should be used only in the spirit of kindness, and not for the purposes of bribery.

The doctor should be a good business man; he should keep his accounts carefully. A card system is the thing for the practice work, and a cash journal for his own money record. He may have an ordinary six-column journal, and classify his expenses, so that he may see how the outgo compares from year to year. He may also cast up a balance and show his profit or loss each year.

Doing business on a cash plan enables him to pay his own bills promptly, and make long friends by short accounts. Then he commands the respect of business men, and is looked upon as a man of responsibility and credit. His credit is good because he never uses it. He is free from the worry and annoyance that want of money, earned but uncollected, brings, and he escapes the deferred hope that maketh the heart sick!

He is able to buy his supplies in bulk and quantity, and for cash he gets a lower price and a selected quality. The cash doctor and the good collector have all the advantage in the world. Life flows along like a happy song, for the doctor has found his work, and is, therefore, blessed. He has time to smile and get the cheerful habit. He is fore-armed for life's emergencies and needs no warning. He plays the game fair and square. He saves for the rainy day and his friends are many.

Unless you are personally interested in a thing, your enthusiasm will soon drop to zero.

CHAPTER XI.

MEDICAL PRACTICE SOCIALIZED.

SOME time in the future, either following a revolution of the whole competitive system of society, or by gradual evolution, there will be an ideal system of medical practice. It has always been the case that the ideals of one age are the common, every-day, real things of some subsequent age. This new system will be based upon the principle of making the financial interest of the patient and the doctor entirely common. Today, with our crude, irrational devices, patient and doctor have nothing in common. Their interests are quite antagonistic. It is surprising that there is no more evil than there is.

In this ideal plan of the future we shall use less and less drugs, less surgery, and more prevention, prophylaxis, hygiene, diet, sanitation, and the health-gaining life of physical activity. When the money motive is gone, the honesty and sincerity of doctors will never be questioned. Ethics will be restored to its original conception, and the doctor or surgeon will never advise for the patient what he would not have done for himself under like conditions.

In this new era there will be a National Health Department, designed and conducted for the interest of the whole people, and not for the benefit or aid of the medical profession, or any branch of it. Peo-

ple will count the health welfare of the nation of far greater importance than War, Navy, Treasury, or any other department of governmental concern. The mad chase for dollars will have ceased. There will be no medical advertising, honest or otherwise. In fact, there will be no advertising of any sort, for there will be no profit-seeking. There will be no more "cancer cures," "ear drums" and nostrums of any sort for which the marvelous is claimed.

The National Health Department will delegate state health matters to state departments and these to county and township and city districts. There will be no more doctors than are needed, and such as needed will be appointed by the Health Department under civil service rules. The salary will be liberal, and when the age limit is reached, doctors will be retired on old age pensions, and used for the purposes of wisdom.

Appointments naturally will be based on recall and a petition with the required percentage of signatures will call any unsatisfactory doctor before the Health Department to show reasons for non-dismissal or transfer.

A properly organized health department would save a large portion of the 600,000 unnecessary deaths that now take place annually. It would banish the 3,600,000 cases of malaria each year in our Southern States, just as the Government health officers have banished it from Cuba and Panama. It would get after venereal diseases as some states have after tuberculosis. It would teach the public sexual

as well as general hygiene. It would conserve the lives and health of the people as thoroughly and successfully as the Department of Agriculture now does those of hogs and cattle. It would regulate the marriage laws to prevent the birth of the unfit. The breeding of children would be managed scientifically.

Every stride toward these very much to be desired ends, makes it harder for the doctor to gain a living, and we are rapidly approaching the time when the profession must be taken over by the public service. With this fate staring us in the face, the medical profession is leading in all the reforms for better national health, seeking, as it were, to eliminate itself. All this, in seeming at least, is the noble spirit of self-sacrifice and unselfishness. You will notice that when I eulogize in this way I speak of the profession as a whole. I still have my opinions, and so have you, about various individual doctors.

It is admitted that such a system would have its troubles, but they could not be worse than those of the present. When the system is worked out, it will mean the retirement of about half the profession, but that is nothing. Those left over will return to nature. There is plenty of land waiting.

Today we appoint only the number of postmasters needed. We do not double the number of post-offices because twice too many men would like to hold office. Medicine is a public service, yet we allow everybody to jump in and scramble after a living in this service—that is, everybody who can get a license.

Under the new system, if the doctor neglected his work, he would lose his job.

Carelessness would bring its own punishment, both in increased work and in exposures by comparative reports. The more successful the methods of prevention and early treatment, the less sickness there would be, and consequently the less work the doctor would have to do; so efficient service would bring its own reward. Then would the patient and the doctor have their interests in common.

If rich people did not care to employ the public doctor, in case there were rich people in that time, they would be free to employ those unconnected with the public service, under certain requirements of reports, etc. No doubt some men would practice independently as specialists, or in the service of the well-to-do, by yearly retainer systems, so frequently used by the legal profession.

Our good friends, Doctor Waugh, of Chicago, Doctor Crothers, of Hartford, and others, are quite enthusiastic about the plan of yearly medical service. Medical and Surgical Clubs have been organized in different parts of the country, but their success depends, like that of any insurance scheme, more upon the business management than upon the doctors. It is the idea of getting something for little or nothing, that makes it appeal to people at all. Unless the dues are made amply large, the service cannot be rendered, and so far no permanent success has been reported. The Emergency Hospital idea was along this line. It spread over the country, and was

utilized by factory and mining workers, but in the main it has failed, just as all like experiments will fail under our present social system.

I made bold to answer one of these theorizers in a recent number of the **Medical World,** and by permission I will quote my argument about these clubs:

A Rejoinder to Dr. Kenney.

The November (1911) **World** has an interesting letter from Dr. Joseph W. Kenney, Adamsville, R. I., in reply to which I wish to offer a few analyzing thoughts.

First, let us all admit that medical practice is in reality a public function; that its very best efforts for human welfare tend to eliminate the doctor, or rather his income, which means the same thing; that eventually medicine will be socialized, and some system used whereby the financial interest of physician and patient may be in common; that this will come through the natural evolution of public service as now seen in the various health boards and Federal health authorities; that this will come only after many years of gradual growth, years wherein it will become more and more difficult for the average doctor to make a living, both because of general health and sanitary improvements, and the crowded condition of the profession; that this might come as a part of a social revolution that would eliminate all profit seeking and competition, but that is not likely, or not now probable.

Having admitted all these things, let us inquire into what is best to be done in the meantime. Let us look into these medical service club ideas proposed by Dr. Crothers, Dr. Waugh, Dr. Kenney and others. How will these plans and schemes, so nice in theory, work out? The fees, or dues, for the club as proposed range from 25 cents to 50 cents a month, or about 38 cents a month. The doctor wishes an income of about $200 a month, which would require about 570 clients. Given this income, must the doctor provide out of it his medicines, office, home, conveyance, and all other living and business expenses? Would this amount do that and leave any margin?

But this is not the worst. Here we have to make each month about 200 collections averaging about $1.00. By what system will these collections be made? Will the people walk

into the office and pay on the dot, as they do their gas bills for fear of having the gas turned off? It is to be doubted. Well, Dr. Kenney says, cut them off the list. Yes, every month cut off ten per cent of lapses, and in ten months your club is gone. You spend hours, either yourself or agents, talking people into the idea, telling them how cheap it is, what a saving, and all the nice arguments in favor of the plan—and it has some stunningly good arguments—agents get red in the face telling the people what a good doctor you are; yet the month they do not pay, off the list they go.

Suppose we apply the industrial insurance plan of collecting the dues. Suppose we keep a man or two all the time collecting, nursing up lapses, procuring new members; it will be readily seen that the club doctor must provide at least another $200 a month to cover all this "overhead expense," which means that he must have about 400 families coming and going on his list to net his neat and clean $200 out of which to provide his own living expense and savings.

Now the average in the United States is about 100 families to each physician; but our club doctor must handle 400 families at these rates (which by the way are about one-fourth what they should be) and this means that he hustles three other doctors out of business.

The winter season comes along, and the good doctor is worked to death. His service is not satisfactory; he cannot come when wanted; members say that it is a fine thing for health and fair weather, but when sickness comes they want a doctor on the spot. Others reply that it is about what you might expect for a dollar a month, and then the per cent of lapses goes up.

The poor club doctor is between the devil of his list and falling income and the deep sea of overwork and neglected patients.

It is very difficult to commercialize and insuranceize the practice of medicine. The present system is a makeshift, and a mighty poor one for all concerned; but it is the best we can hope for under the present industrial and social conditions. Medicine is just as much a struggle for life and the survival of the fit, the keen, and the strong as is business or any thing else. To set up an ideal theory, and expect it to work successfully in the midst of what is now going on in the business world, is just as foolish as to drop the monkey wrench into the threshing machine.

It is kind and good of Drs. Waugh and Crothers to sit in their easy editorial and sanitarium office chairs and dream these nice dreams for the poor fellows in the real fight for a living in medical practice. It may be true that men of means might employ their physicians by the year; some do, but it is not on a $1 a month basis. Some corporations also employ lawyers by the year, but most lawyers have to scratch up an income from petty cases, small fees that come in fits and starts, as does the work of the average doctor.

It is up to each physician to do the best he can to make a good fight, do good work, collect his bills, bear heavy when he can and press light when he knows ability is weak, and in it all to be true and kind. He must be the doctor first, and the business man promptly after. At best some of us will drop out and fall by the wayside. Others, capable and strong, will walk over us to success, and we shall be proud of them. We like to see successes, our own if possible, but the successes of others also lend us hope and cheer us along the way. If, even at the end, we have got our board and clothes, playing the game fairly, we have done as well as any other, and we all pass out bare and nude, just as we came in. Success is not what we shed off in worldly good, but success is how well and how kindly we did our work, what impress we made on other minds, what cheer we radiated, what smiles we made to grow where frowns had been.

Let us have a few reports from men who are now serving successful medical service clubs, or let us have reports from those who have tried and failed. Speak up, doctors, gentlemen, it will be worth more than all the theory we can spin in a hundred years.

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All these things are but efforts to control competition, and are about as successful as the anti-trust Sherman law is in controlling trusts. It seems strange how religiously we all want competition for the other fellow, but want to get out from under it ourselves if we can. We prate about how necessary it is, yet we lie awake nights thinking out some scheme to get away from it.

We are slowly learning the evils of competition. View just now both Capital and Labor trying to escape these evils, while Law still hugs to its bosom the theory that Competition is a blessing.

Begging pardon for this digression, let me record my opinion that the promotion of the public health is just as much a function of government as is the coinage of money; and those who talk about the freedom to treat the sick are just as befogged theorists as those who would stop the work of the Rockefeller Institute because a few monkeys, dogs, and Guinea pigs are made to suffer. Bless the poor hearts of these antis—all of them, the faith healers, the occult moonshiners, the drugless sophistry spinners of every name—they will all fall into line under the ideal system of the future. What are we going to do about all these fee-getting cults which practice medicine under one name or another? Do we gain anything by prosecuting, investigating, and exposing? Are not our efforts misunderstood, and do they not revert to our own injury? Do you think the passing and enforcement of the new medical laws has anything to do with the development of all these drugless healing cults?

Some one got the facts about the investigation of the "Carnegie university" and made a neat story of it. I want to quote this story:

> To protect the public against incompetent doctors, legitimate medical schools are constantly increasing their entrance requirements. Each year, in consequence, the graduates of these institutions are better equipped for their profession than those who preceded them.

Unfortunately, however, there are still a number of "diploma factories" in existence. At these fake institutions degrees may be literally bought. For an "M. D.," perhaps, $50 will be charged; for an "LL. D.," $40; for a "Ph. D." $35, etc.

In most cases no preliminary education is required, the courses of instructions are entirely optional and may be omitted altogether, and the diploma is promptly awarded upon payment of the price.

The American Medical Association, which maintains a special department for the exposure and rooting out of medical frauds of all kinds, reports in its journal an investigation which it recently undertook of an institution known as the "Carnegie university." It is a Delaware corporation, and with it is affiliated the National Institute of Mechano-Therapy of New York city, chartered by the state of New York.

According to the annual announcement of the Carnegie university, it is "the oldest and most celebrated institution of learning of its kind in the United States of America. It was initiated, promoted, and financed by a few of America's most prominent gentlemen in the financial as well as the professional world. These gentlemen, knowing the progress that drugless therapy (healing) has made in the last twenty years, and understanding the great future of this science, saw the necessity of devoting one of the colleges of a great university to drugless therapy, so that those earnestly desiring to become drugless physicians and bloodless surgeons could acquire a thorough and scientific knowledge of the various sciences which constitute the natural method of healing. The university was named in honor of Carnegie, the great philanthropist."

Among the degrees conferred by this institution are M. D., LL. O., Ph. D., M. A., Sc. D., D. D. D. O., D. C., M. T. D., and Ps D.

In reply to his request for information, the agent of the American Medical Association received a five-page form letter on a letterhead which bore halftone pictures of Wilmington's two largest office buildings on which the words "Carnegie University" had been inserted to give the impression that this institution occupied these buildings. Facsimiles of the diplomas were also received. They were issued by "Carnegiana Universities" and were "magnificently engraved" on "white parchment" 19x24 inches.

The investigator then wrote to the effect that he wanted to start an office in England as a "bonesetter" and asked whether

he might obtain a diploma of mechano-therapy without waiting to take the course, as he wanted to leave for London in two weeks. He said he would take an examination if they would send him the questions, and would be willing to pay for the full course without taking it.

In a few days he received a reply accepting his proposition, and inclosing the examination questions. Needless to say, the questions were answered in such a way as to make perfectly plain to anyone that the examinee was ignorant to a degree, to treat disease. Here are a few of the questions and the answers given:

Question: Give pathology, etiology, symptoms, and treatment for malaria.

Answer: Malaria is found in the south and in swampy places. The patient should be given massage and the spine should be adjusted to improve the circulation. It is also better to have the patient move from a malarial place to where it is dry.

Question: How would you replace a dislocated jaw?

Answer: The jaw should be pulled forward or pushed back, as the case may be, and the joint massaged and adjusted.

Question: What is histology?

Answer: Histology is the study of the history of the anatomy and physiology of the body.

Question: What is embryology?

Answer: Embryology is the study of the new-born baby and how to care for it.

Question: What is keratitis? Give course of treatment.

Answer: Keratitis is inflammation of the eye. It should be treated by manipulating the muscles and nerves of the neck and by adjusting the vertebras of the neck. Cold water bandages may also be used.

Question: Give treatment for iritis.

Answer: Iritis is also an inflammation of the eye and should be treated as described in keratitis.

Question: Describe the portal circulation.

Answer: The portal circulation is the circulation of the chyle and chyme which is found in the stomach when the food is being digested. It then goes into the blood to build up the body.

Question: Describe the fornix.

Answer: The fornix is that part of the tonsils which is

affected in catarrh. An adjustment of the vertebra of the neck will often help it.

Upon receipt of these answers, which, of course, an average school boy would hesitate to hand to his teacher, the "university" wrote as follows:

"We herewith have the pleasure to inform you that you have passed your examination very satisfactorily and that the Carnegie university has conferred on you the degree of doctor of mechano-therapy. The diploma will be forwarded to you on receipt of postoffice money order for $50."

All this occurred within the space of ten days. By the same process, doubtless, almost anyone wishing to engage in the practice of drugless healing might have obtained a diploma as easily.

Commenting editorially on the result of the investigation, the "journal" of the association says:

"For $50 the degree of doctor of mechano-therapy and an ornate 'diploma' have been offered to one whose ignorance of physiology and anatomy was such that he could not distinguish between the portal circulation and the gastric digestion, who did not know the difference between the fornix and the pharynx, and whose idea of histology was that it dealt with the history of anatomy and physiology.

"Think of it! In most of the states of the union, a man exhibiting this colossal ignorance of the human body is permitted to treat any disease that flesh is heir to—providing he does not use drugs."

The tragedy of the situation is that in many states of the union an individual without even an elementary education and with absolutely no technical training, can do business as a "drugless healer" and carry on his malpractice with impunity so far as the law is concerned, and, with a "magnificently engraved" diploma on "white parchment" to fortify him, he might readily build up a large practice among the credulous and ignorant.—*Cleveland Plain Dealer.*

In that great day when patients and doctors have their interests in common, patent medicine will mould on the shelves, and the druggist will become the true chemical assistant of the doctor. To be a pharmacist will mean something then. It now

means a constant struggle to make both ends meet, by charging all the traffic will bear for prescription work, and piecing out the income with the sale of "patents," tooth brushes, and soda water.

You and I will not live to see a rational system of medical practice instituted. It will come slowly; but when the great social change comes it may come quickly. Before then we may see the National Health Department organized. We shall certainly see a more rigid enforcement of Pure Food Laws, and those men who seek what they call "medical freedom" will not be permitted to poison, debauch, and slay, by food and drug adulteration. I do not imagine we shall ever try to prevent the individual from employing Christian Science, New Thought, Osteopathy, or any other drugless healing cult, but one thing is sure: we shall stop the deception and defrauding of the people by those who make unwarranted claims for modes of treatment and medicines. Surely the Supreme Court will have to revise its decision that the claim to cure incurable diseases, even when the maker knows it is false, is not punishable under the law; for we shall soon have laws to stop these evils. We may also expect to see laws regulating the practice and business methods of all schools, and it may become a dangerous thing for an osteopath to promise a cure for blindness from congenital syphilis, as I knew one to do, and it may become illegal to sell "cures" and contracts to cure. Is it not a beautiful tangle, this present state of things?

We shall sooner or later see authority given to the

proper officials to regulate every doctor's business dealings. We may see a great decrease in the number of doctors. Evolution works slowly but surely. Each year we see some progress.

Our improvements come as fast as selfish interests will permit. It is a good world, but it will be better. Cheer up, doctor.

To recapitulate: Medical practice is a public function, as much as school teaching or carrying the mail. It should be publicly controlled.

The present system is crude, unscientific, and tends to make medicine a private graft, and to make the medical practice license a permission to prey upon the sick and injured.

The doctor should be the trusted and respected court of last resort as well as first resort in all health matters. From his work and life all selfish motives should be eliminated.

As it is, the doctor has lost the public confidence, and is the victim of contumely and distrust; and for this he is himself largely to blame.

The doctor should be employed to prevent sickness, and should be called early to combat it at the beginning. As it is, he is called only when grave danger threatens, and is looked upon as a necessary evil.

He should be the friend and health confessor of the people. As it is, his bills are repudiated whenever possible, and the usual attitude toward him is that of hostility.

He should receive for his work enough to enable him to live decently, own a good home, and lay by an

old age competence. As it is, he receives on the average less than the blacksmith or carpenter, and his profession has no financial credit or business standing.

Now the question is, What are we going to do about it?

Luck is generally a reasonable amount of ability backed up with hard work.

Looking into the flaws of your own work will make you less critical of the work of your fellows.

CHAPTER XII.

MEANTIME, WHAT ARE YOU GOING TO DO ABOUT IT?

I have now come to the closing chapter of my story. I have tried to draw for you a picture of things as they are, and another of things as they should be. In the first, I have not overdrawn the chaotic condition of medical affairs. In fact, medicine is no more chaotic than the rest of the business world. I have not sought to convert you to pessimism, for I am myself an optimist. I have admitted that for the present there is hope of only a gradual improvement which will not very much help those now living. All this has brought us to the question: What are you and I going to do to make an honest and satisfactory income from the practice of medicine?

I have shown you how I have solved the problem by the use of honest newspaper advertising for an office practice. While I have always been interested in medical and surgical research work, and have great respect for our active investigators, conditions have forced me to keep practical, and not to become ultra-scientific. I have not forgotten the saying, "We have but once to live and when dead we are a long time dead."

It is better to conform, if in all honesty ample in-

comes can be made. But if a good income is not honestly acquired, conformity to all the notions of ethics does not recompense. To acquire a good income honestly is better than to starve, even though one has to smash several traditions of medical history. It is all very well for those who sit in seats of power, with their large fees and incomes, to preach and prate about ethics. Put them in the ranks and give them so little it would hardly make ends meet, and we should hear a different tune.

Those doctors who live like tree-toads, and take on the color of their environment, get along best. They are all things to all men. They can graft and bamboozle in secret, and yet wear the hypocritical cloak of ethics and sit among the elect at society meetings. May the Lord have mercy on their little shriveled-up souls; I cannot. How they must despise it all—themselves included.

When I did not succeed in medicine ethically and honestly, I let ethics go and clung to honesty. When I cannot make a living "ethically" or "unethically" and honestly in the practice of medicine, I will let medicine go and try something else. Farming is a good field for doctors.

During my three years of honest advertising I have met many local doctors, and quite a number have come from a distance to visit me. Many of these men have claimed to agree with me. Some local doctors who were friendly at first, later gave me a wide berth for fear of ethical contamination. Is the organized profession a remnant of the Spanish In-

quisition? Some of the leading journals wanted my writings very much, but were afraid to publish them for fear of being branded with that terrible mark, "Unethical," unclean, leprous! It is wonderful what an array of narrow-mindedness and bigotry the average of the organized profession can display. It affords the thoughtful observer no little amusement, for doctors are often, like other folks, just grown up children.

If this question of making an honest living is up to you to solve, my advice is, make it ethically if possible, but honestly. If you cannot be ethical and honest, then cling to honesty and let ethics go, for what is termed "ethics" is largely a pseudo-system for selfish ends. It is as truly ethical as Churchianity is truly Christian.

If you can do certain work well, let the people know about it. If you are in a calling practice, put your work on a business basis, and extend your circle by open efforts for self-advancement. If you like office work and are in a good sized town, fit yourself and your office to deliver the goods, then tell the people in some good way what you have to sell. How, and by what means, is your problem. I have shown you my way. You must find yours. If I can help you I shall be glad to do so. I am a believer in individualism, but not in using it for personal profit. While I live under the present profit-seeking system I must be prepared to meet its demands, and that is why I collect my fees and my pay, just as you must collect yours.

If you took me aside and asked me as "man to man" for my best advice to doctors, I would tell you just those things I am trying to apply to my own life. Let me see if I can put the matter in a few words:

Be strong and fearless in right doing, giving and demanding the square deal.

Be attentive to your business, diligent in self-improvement, and progressive in your thought. Keep out of the ruts.

Attend to the common things as thoroughly as to the more serious ones; for good work on an ingrowing toenail leads to something more important.

Be positive and assuring, instead of vacillating and uncertain. Do not guess this and perhaps that, and do not try this and try that, but if forced to compromise, choose the lesser of two evils.

Have fixed opinions, but be ready to change them for good cause, and more ready to admit the change. It takes a commendable courage to say, "I was mistaken."

Be active to increase your business by any honest means. Success comes to those who go after it. Dame Fortune is a fickle jade, and you must dominate her.

Pay all bills promptly, and demand like payment of your own. Remember it is dangerous to allow people to owe you.

Be cheerful and pleasant without being silly. Keep and develop your sense of humor, for without it a man is lost.

Be kind and courteous without playing the buffoon. All affectation is quickly recognized, and we all hate a play-actor in real life.

Be clean, orderly, and punctual, without overdoing it.

Let whiskey and habit-producing drugs alone, and when sick call some doctor besides yourself.

Be a man first, and a good citizen, then after that a good doctor.

Be ethical in reality, even if conditions demand your rupture with what is termed ethics.

Be unethical, if by any honest method you can gain a living, rather than fail and play the hypocrite. It is possible to be ethically unethical.

These, my good brother, are the humble opinions of one who has been for ten years through the mill, between the upper and nether mill stones of the gods that grind exceeding small. It is not my purpose to teach you. If my story helps, I am glad of it; if it interests, or even amuses you, I am still glad. If it shocks the hide-bound, narrow-minded, tradition-worshiping reader, and awakes in him a new understanding of medical things, I am mighty glad.

When we come to the end of the story, when the game of life is finished and the accounts are balanced, we shall pass out, one by one, as we came in. From first to last we are but helpless playthings in the hands of Fate. The Ultimate Good is the only thought of Mother Nature, and though hindered by the designs of men, Right will prevail. Law is

eternal, and Truth is unchangeable. Evolution can be checked but for a moment. Sooner or later society will be socialized, and medicine along with it.

This is the story. Make the most of it. Do with it what you will. If it serves to light the fires of my professional funeral-pyre, I face my fate with full faith in all my prophecy.

THE END.